Fast Food

Edited by Justin Healey

ISSUES IN SOCIETY

Volume 343
### CHAPTER 1  FAST FOOD AND NUTRITION

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food to have sometimes</td>
<td>1</td>
</tr>
<tr>
<td>Fast food healthy options</td>
<td>3</td>
</tr>
<tr>
<td>One in four Australian adults obese</td>
<td>4</td>
</tr>
<tr>
<td>Surviving fast food</td>
<td>5</td>
</tr>
<tr>
<td>Fast food and take-away</td>
<td>10</td>
</tr>
<tr>
<td>Recommended serves and serving sizes</td>
<td>11</td>
</tr>
<tr>
<td>Helpful healthy eating tips</td>
<td>12</td>
</tr>
<tr>
<td>Kilojoules and fast food – the ‘in-your-face’ facts</td>
<td>13</td>
</tr>
<tr>
<td>The future of food labelling</td>
<td>16</td>
</tr>
<tr>
<td>Traffic light labelling – the evidence</td>
<td>18</td>
</tr>
<tr>
<td>Industry welcomes food ministers’ labelling decision</td>
<td>18</td>
</tr>
<tr>
<td>Traffic light labelling: making healthy food choices easier for Australians</td>
<td>19</td>
</tr>
<tr>
<td>Seeing red: critics of better food labels fail to understand public health measures</td>
<td>22</td>
</tr>
<tr>
<td>Nine in ten consumers give traffic light labels green light</td>
<td>23</td>
</tr>
<tr>
<td>Food industry digs in heels over traffic light labels</td>
<td>24</td>
</tr>
<tr>
<td>Is a ‘fat tax’ the answer to Australia’s obesity crisis?</td>
<td>26</td>
</tr>
<tr>
<td>Australia needs a tax on junk food</td>
<td>28</td>
</tr>
<tr>
<td>Food taxes not the cure for obesity</td>
<td>28</td>
</tr>
</tbody>
</table>

### CHAPTER 2  JUNK FOOD MARKETING TO CHILDREN

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food marketing to children</td>
<td>29</td>
</tr>
<tr>
<td>Government delays junk food advertising review again</td>
<td>31</td>
</tr>
<tr>
<td>Would banning food advertising aimed at children reduce the growth in obesity?</td>
<td>32</td>
</tr>
<tr>
<td>Arguments for and against a ban on food advertising aimed at children</td>
<td>32</td>
</tr>
<tr>
<td>Government, parents or advertisers: who should decide what kids watch and eat?</td>
<td>34</td>
</tr>
<tr>
<td>Food advertising ‘censorship’ bill won’t address obesity</td>
<td>35</td>
</tr>
<tr>
<td>The facts about food marketing to kids</td>
<td>36</td>
</tr>
<tr>
<td>Pester power: why junk food ads and children shouldn’t mix</td>
<td>37</td>
</tr>
<tr>
<td>Parents duped by sports star endorsement of junk food</td>
<td>39</td>
</tr>
<tr>
<td>Side-stepping the censors: the failure of self-regulation for junk food advertising</td>
<td>40</td>
</tr>
<tr>
<td>Junk food ad ban must be compulsory, not voluntary</td>
<td>41</td>
</tr>
<tr>
<td>Fat lot of good campaign against junk food is doing</td>
<td>42</td>
</tr>
<tr>
<td>Fight against fat: when advertising goes bad</td>
<td>43</td>
</tr>
<tr>
<td>Junkbusting FAQS</td>
<td>45</td>
</tr>
<tr>
<td>Combating pester power</td>
<td>48</td>
</tr>
</tbody>
</table>

**Exploring issues – worksheets and activities**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fast facts</td>
<td>57</td>
</tr>
<tr>
<td>Glossary</td>
<td>58</td>
</tr>
<tr>
<td>Web links</td>
<td>59</td>
</tr>
<tr>
<td>Index</td>
<td>60</td>
</tr>
</tbody>
</table>
Fast Food is Volume 343 in the ‘Issues in Society’ series of educational resource books. The aim of this series is to offer current, diverse information about important issues in our world, from an Australian perspective.

**KEY ISSUES IN THIS TOPIC**

Australians spend about a third of their weekly household food budget on food prepared outside the home. These meals tend to be fast food and take-away, which are often high in saturated fats, salt and sugar. Excessive consumption of fast food contributes to obesity, heart disease and a range of other conditions. ‘Junk food’ should only be eaten occasionally, this includes potato chips, soft drinks, chocolates and sweets, cakes, and take-away food like fried chicken, pizza, hotdogs, fries and hamburgers.

*Fast Food* is a helpful guide to better informed dietary choices, and features detailed advice on the nutritional contents of Australia’s major fast food products, including kilojoule counts, portion sizes and packaging information. What are the healthy alternatives to fast food? Should the government introduce traffic light labelling, or even a ‘fat tax’?

This book also examines the debate over food marketing to children. Should Australia ban junk food advertising aimed at children, who so often resort to ‘pester power’? In a nation where a quarter of the population is now obese, are Australians finally fed up with junk food marketing that targets children?

The topic is presented in two chapters: Fast food and nutrition; and Junk food marketing to children.

**SOURCES OF INFORMATION**

Titles in the ‘Issues in Society’ series are individual resource books which provide an overview on a specific subject comprised of facts and opinions.

The information in this resource book is not from any single author, publication or organisation. The unique value of the ‘Issues in Society’ series lies in its diversity of content and perspectives.

The content comes from a wide variety of sources and includes:

➤➤ Newspaper reports and opinion pieces
➤➤ Website fact sheets
➤➤ Magazine and journal articles
➤➤ Statistics and surveys
➤➤ Government reports
➤➤ Literature from special interest groups

**CRITICAL EVALUATION**

As the information reproduced in this book is from a number of different sources, readers should always be aware of the origin of the text and whether or not the source is likely to be expressing a particular bias or agenda.

It is hoped that, as you read about the many aspects of the issues explored in this book, you will critically evaluate the information presented. In some cases, it is important that you decide whether you are being presented with facts or opinions. Does the writer give a biased or an unbiased report? If an opinion is being expressed, do you agree with the writer?

**EXPLORING ISSUES**

The ‘Exploring issues’ section at the back of this book features a range of ready-to-use worksheets relating to the articles and issues raised in this book. The activities and exercises in these worksheets are suitable for use by students at middle secondary school level and beyond.

**FURTHER RESEARCH**

This title offers a useful starting point for those who need convenient access to information about the issues involved. However, it is only a starting point. The ‘Web links’ section at the back of this book contains a list of useful websites which you can access for more reading on the topic.

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FOOD TO HAVE SOMETIMES

‘EXTRA’ FOODS CAN BE ENJOYED OCCASIONALLY AS PART OF A HEALTHY DIET, ACCORDING TO THIS FACT SHEET FROM BETTER HEALTH CHANNEL

Some foods should only be eaten occasionally. These ‘extra foods’ (sometimes called junk food or treats) are foods like potato chips, chocolate, cakes, lollies, soft drinks and some take-away food like hamburgers and hotdogs. These foods are usually low in nutrients and high in salt, sugar or fat. They are ‘extras’ to be enjoyed occasionally.

If these foods regularly replace more nutritious and healthy foods in your diet, you are likely to become overweight and may develop vitamin and mineral deficiencies and other health problems.

You can have ‘extra foods’ occasionally

We all enjoy a ‘treat’ now and then and it’s okay to have some of these foods now and then as an extra. How often you have them depends on your weight, age and how active you are. But you should keep to small amounts.

If you are overweight and want to lose weight, you should limit these ‘extra’ foods to no more than every second day – and then only if you have a nutritious and balanced diet and you are physically active.

If you are active and not overweight, you could probably have one or two ‘extra foods’ a day – as long as you’ve had your daily requirements of meat, dairy, fruits, vegetables and cereals.

Foods prepared outside the home

Australians spend around one-third of their weekly household food budget on foods prepared outside the home. These include restaurant meals, fast food and take-away. These foods are often high in fat, salt and sugar. High consumption of these foods may contribute to obesity, heart disease and other disorders.

Fast food and take-aways are often high in saturated fats

The foods sold by popular fast food and take-away outlets, including fried chicken, hamburgers and hot chips (fries), are often high in saturated fats. These types of fats can cause high cholesterol levels and may cause health problems.

These outlets prefer to use saturated fat because it is cheap and can withstand high cooking temperatures. One fast food or take-away meal may have more than 50 per cent of your daily fat allowance and almost 100 per cent of your daily saturated fat allowance.

Saturated fats should make up less than 20 grams of the fat in your daily diet. However, Australians consume, on average, more than 40 grams of saturated fat per day.

For example, each of the following take-away meals contains about 20 grams of saturated fat:

- Fish and chips
- Four slices of pizza supreme
- Hamburger with the lot and chips
- Fried chicken and chips.

Fat is high in kilojoules

Fat is energy-dense; it contains twice the amount of kilojoules per gram (37 kJ) as protein (17 kJ) or carbohydrates (16 kJ). Regularly eating more kilojoules than your body needs will lead to weight gain.

Several studies indicate that saturated fats can cause greater weight gain than polyunsaturated or monounsaturated fats, even when all varieties contain equivalent kilojoules. Saturated fats also contribute to the risk of heart disease by increasing blood cholesterol levels.
Salt

Convenience foods usually contain high amounts of salt. The body needs some salt. However, too much salt in the diet has been associated with an increased risk of high blood pressure, which is a known risk factor for heart disease and stroke.

A maximum salt intake of no more than 5 g of salt per day is recommended for adults with normal blood pressure. Many Australians consume double this amount each day. Less than 20 per cent of our salt intake comes from salt we add to our food. Cutting back on take-away foods will help reduce your salt intake.

Sugar

Foods like soft drinks, cordials, biscuits, cakes and lollies have high sugar content. Although sugar has not been directly linked to developing heart disease or diabetes, there is evidence that a high sugar intake may contribute to the development of overweight and obesity.

In Australia, soft drinks have become among the most popular beverages. Their consumption has increased by 30 per cent in 10 years. The size of containers has also increased. Ten years ago soft drinks were available in 375 ml cans. Now they are commonly sold in 600 ml bottles, which provide at least 12-15 teaspoons of sugar.

Studies suggest an association between increasing consumption of sugar-sweetened drinks and the development of childhood obesity. That’s why eating foods and drinks with high sugar content should be limited.

Problems caused by too much sugar

High sugar intakes have been associated with:

➤ Tooth decay
➤ Decreased levels of good cholesterol
➤ Increased levels of blood fat associated with diabetes and heart disease
➤ Childhood obesity.

Additives

Food additives in junk foods are generally used to prolong shelf life or to enhance colour, flavour or texture. Some people are sensitive to food additives. Symptoms may include diarrhoea and skin rashes.

Healthier choices

Market surveys indicate that Australians would like healthier take-away foods. Perhaps the easiest way to enjoy a fast food meal, without consuming too much fat, is not to have the hot chips or fries. A large serve of chips can contain around 50 grams of fat. Current dietary recommendations advise that adults trying to lose weight should restrict their daily fat intake to 40 grams or less. Active people can have up to 70 grams of fat.

Fast foods that have relatively low levels of fat and salt include:

➤ Pizzas with less cheese and meat
➤ Skinless chicken
➤ Grilled chicken

Moderation is the key

‘Extra foods’ may have higher levels of fat, salt and sugar, but they still contain nutrients and can be considered as a small part of a healthy diet. A general rule of thumb is to eat fresh, healthy foods about 90 per cent of the time, and indulge in the extra foods no more than 10 per cent of the time.

Suggested amounts of ‘extra foods’

A healthy diet doesn’t need extras, but if you want to include some extra foods in your daily diet, the Australian Guide to Healthy Eating recommends that people over four years of age, who are not overweight, could have up to three serves of extra foods each day, in addition to a nutritious diet.

Examples of one serve include:

➤ 1 doughnut
➤ 2 tablespoons of cream or mayonnaise
➤ ½ small bar of chocolate
➤ 1 can of soft drink (375 ml)
➤ 12 hot chips
➤ 1½ scoops of ice cream (50 g scoop).

Alcohol is also an ‘extra’

For adults who choose to consume alcohol the following amounts equal one serve

➤ 200 ml wine (2 standard drinks)
➤ 60 ml spirits (2 standard drinks)
➤ 600 ml light beer (1½ standard drinks)
➤ 400 ml regular beer (1½ standard drinks).

Where to get help

➤ Your doctor
➤ An accredited practising dietitian, contact the Dietitians Association of Australia.

Things to remember

➤ Fast foods, take-away, lollies and chips are typically high in fat, salt or sugar. They should be considered as extras to your usual diet
➤ Australians are spending more money on extras. Spend your money wisely. Choose the healthy option when eating out or having snack foods
➤ ‘Extra’ foods can be enjoyed occasionally as part of a healthy diet.

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Fast food healthy options

This fact sheet by Foodwatch nutritionist Catherine Saxelby offers some facts and tips to help you make the healthiest fast food meal choices

Busy people often race from appointment to appointment, never leaving themselves time to prepare their lunch or dinner. So as our lives have become more frantic, more and more of us tend to grab a bit to eat and go!

Sadly, many a time what we grab is not the right fuel, not giving us the vital nutrients our bodies need but with too much of the ‘heavy stuff’ – fat, salt and kilojoules.

7 problems with fast food

1. Not balanced

Most fast food is high in fat, saturated fat, salt and kilojoules with very little in the way of fibre. On its own, it doesn’t make a balanced meal, lacking vitamins and minerals – even though it’s often advertised as a ‘complete meal’.

2. Eat only occasionally

While nutritionists say that an ‘occasional’ fast food meal does no harm, they mean only once a fortnight.

3. Kilojoule-laden

The sheer amount of fat and kilojoules you can take in is boggling. In our overweight, sedentary world, no one needs this level of intake. A standard burger from a chain will set you back 20 grams of fat (10 grams of it saturated) and 1,800 kilojoules. Upsize to a ‘whopper’ or ‘super’ version and you’ll get double or triple the kilojoules.

4. Ever expanding portion sizes

What used to be standard serve of fries is now double or triple that of years ago. When McDonalds first began in 1955, a serve of fries weighed only 72 grams. Today, it’s a fat-inducing 205 grams – almost three times as much. Coke serves have soared from an average 200 ml glass in 1955 to a whopping 950 ml bucket today. And researchers have shown that the bigger the serve you order, the more you’ll tend to eat of it.

5. Beware meal deals

Fast food outlets are masters at getting you to order bigger for a fraction more (another 30 cents more for the large serve and ‘two-for-one’ meals deals). It’s value for money – but it’s a bargain that our waistlines don’t need.

6. Encourages overeating

Fast food is a fat-inducing way of eating. You eat with your hands – not a fork and knife. You eat while you walk or drive – not seated at a table. You chow down quickly – no leisurely dinners at take-aways.

7. Bad saturated fat

Most fast food has the worst sort of fat. Anything that’s deep-fried ends up being high in saturated fat, because the common commercial frying fats are palm oil or beef tallow (both saturated). Chains are now starting to switch towards healthier oils for deep frying, which will make a big difference.

But, even when it’s not deep-fried, fast food still has ‘hidden’ fats.

Fat has many functions in fast food. It:
- Keeps baked goods like buns or pizza base soft and moist
- Makes corn chips or fries crisp
- Creates an aroma in anything served hot.

How the fat and kilojoules stack up

- Hungry Jack’s Double Whopper with Cheese meal deal – with a two-patty-and-cheese burger, large fries and a large Coke – shows how fast food packs the fat in
- It’s got 7,125 kilojoules and 88 grams of fat, 31 of which are saturated
- The recommended daily kilojoules for Australian women is roughly 8,400; for men, it’s 10,500
- And that saturated fat figure? You’re getting your total intake for the day – in one meal.

You’re getting your total fat intake for the day – in one meal.
Staying lean with fast food – here’s how:

➤ Only eat what you NEED
➤ If there’s a choice, opt for the smaller size
➤ Don’t buy anything named ‘super’, ‘triple’ or ‘whopper’
➤ Share large portions with a friend
➤ Don’t get fooled by upsized meals. It might cost only 40 cents more, but it costs you a lot in extra kilojoules you don’t need
➤ If you do buy two-for-one offers, don’t eat it all at one sitting
➤ Women – if you eat together with your man, don’t eat the same sized portions.

What’s to drink?

Don’t drink in the kilojoules. Order:

➤ Water or mineral water
➤ Diet soft drinks
➤ Tea or coffee with skim milk
➤ Cappuccino with skim milk
➤ Sports waters (half the sugar of soft drink).

Or order the smallest size of fizzy drink, milkshake or sundaes. Or share with a friend.

10 best take-aways

1. Barbecued chicken (remove skin) with jacket potato and coleslaw
2. Grilled chicken fillet burger (hold the sauce)
3. Clear Asian noodle soup with seafood, greens, bean shoots
4. Sushi accompanied by vegetable broth
5. Chinese stir-fry with steamed rice
6. Plain burger with salad
7. Lebanese/Turkish donor kebab with tabouli
8. Subway – any of the ‘Under six grams of fat’ filled rolls
9. Thin-crust pizza with vegetarian topping
10. Chicken or lamb satays with peanut sauce.

Produced by nutritionist Catherine Saxelby to help busy people eat better and look after their health. You can find more handy tips, articles and quick recipes at Catherine’s website www.foodwatch.com.au. Catherine Saxelby is an award-winning food writer and author of ‘Nutrition for Life’ and ‘Zest Cookbook’ (Hardie Grant Books).

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One in four Australians aged 18 years and over were obese in 2007-08, according to the latest figures released by the Australian Bureau of Statistics.

Since 1995, the rate of obesity has risen from 19% to 24%, with men gaining weight faster than women. There were just as many people overweight (37%) as there were people of normal weight (37%) in 2007-08, a slight shift from 1995 when there were more people of normal weight (41%) than there were people overweight (38%).

Rates of obesity were related to a number of environmental and socioeconomic conditions:

☆ A third of Australian adults living in areas of most disadvantage were obese (33%), almost double that of people in areas of least disadvantage (17%)
☆ People who had not completed Year 12 were more likely to be obese (31%) than those who had completed this level of education (19%)
☆ More adults in outer regional and remote Australia were obese (31%) than those in major cities (23%).

When data on overweight and obesity are combined, the picture of increasing weight gain in Australians becomes more evident. In 2007-08, 61% of adult Australians were overweight or obese. This rate was higher for men (68%) than women (55%), and higher for older people than younger people. Three-quarters of 65-74 year olds were overweight or obese (75%) compared with 37% of 18-24 year olds.

The consequences of this level of overweight and obesity are increased risks of chronic health conditions, increased health service use and increased mortality.

More details can be found in Overweight and Obesity in Adults in Australia: A Snapshot (cat. no. 4842.0.55.001).

BURGERS AND CHIPS, SUSHI, NOODLES, PIZZA, WRAPS – WE'RE SPOILT FOR CHOICE WHEN IT COMES TO CONVENIENT FAST FOOD. CHOICE LOOKED AT SOME OF AUSTRALIA’S BIGGEST FAST FOOD CHAINS TO HELP YOU CHOOSE THE HEALTHIEST OPTION AVAILABLE.

COMPARING THE NUTRITIONAL RESULTS OF FOODS FROM MAJOR FAST FOOD OUTLETS.

**Oporto**
This Portuguese-style chicken specialist styles itself as ‘nothing fried, nothing frozen’, but the fine print points out that their chips, 100% premium chicken breast Bondi Bites and Veggie Burger are all fried. Some Oporto burgers come with two or three grilled fillets, so stick to a single fillet and avoid the skin if you choose a whole chook.

**Eat this**
Grilled Chicken Breast Strip pack (4 x strips) with Garden Salad (with dressing)
1,188 kJ, 11.4 g fat, 698 mg sodium
Single Fillet Norm Burger
1,500 kJ, 14.9 g fat, 818 mg sodium

**Not this**
Rappa with small chips
3,193 kJ, 45.9 g fat, 1,323 mg sodium
Veggie Burger
2,700 kJ, 34.3 g fat, 1,080 mg sodium

**You save up to 2,005 kJ, 34.5 g fat and 625 mg sodium.**

**Red Rooster**
Some options here come crumbed and fried, but grilled and barbequed options are also available – just avoid those that come with bacon and cheese. Try salad or vegetables on the side to add some extra vitamins and minerals.

**Eat this**
Free Range D’Lish Garden Salad
478 kJ, 2.2 g fat, 233 mg sodium
Free Range D’Lish Burger
1,340 kJ, 8.3 g fat, 469 mg sodium

**Not this**
Rippa with small chips
3,193 kJ, 45.9 g fat, 1,323 mg sodium
Vegetarian Burger
2,700 kJ, 34.3 g fat, 1,080 mg sodium

**Save up to 2,691 kJ, 36.4 g fat and 1,190 mg sodium.**

**Domino’s**
Who doesn’t love pizza? Make the right choice and keep your portions under control, and you can enjoy some guilt free. Domino’s now offer a Good Choice range in single serves, taking the legwork out of finding the healthier choice.

According to Domino’s and Pizza Hut, a serving of their regular range is one slice – but we disagree. Asking around the CHOICE office, we found that even the smallest eater is likely to eat two slices, so we’ve doubled the serving size.

**Eat this**
Penne Pasta with Roasted Chicken, Mushrooms and Tomato
1,548 kJ, 1.7 g fat, 575 mg sodium
Prawn and Spinach Ciabatta Pizza (Good Choice)
1,645 kJ, 2.2 g fat, 606 mg sodium

**SURVIVING FAST FOOD**
CHOICE looks at the menus at some of Australia’s biggest fast food chains to help you choose the healthiest options on offer.
Not this
Meatball and Rasher Bacon Edge Pizza (2 slices)
2,060 kJ, 22.8 g fat, 1,028 mg sodium
Chicken Carbonara Pasta Box
2,900 kJ, 32.2 g fat, 1,260 mg sodium
Save up to 1,352 kJ, 31.5 g fat and 685 mg sodium.

Pizza Hut
Unlike Domino’s, Pizza Hut lacks a healthier choices menu. Don’t have nutritional info at hand? Follow these rules – always go thin crust and avoid anything where the main topping is meat or cheese.

Eat this
Thin and Crispy Veggie Supreme Pizza (2 slices)
1,162 kJ, 9.2 g fat, 612 mg sodium
Thin and Crispy Classic Hawaiian Pizza (2 slices)
1,226 kJ, 11.2 g fat, 810 mg sodium

Not this
Deep Pan BBQ Meat Lovers Pizza (2 slices)
2,066 kJ, 21.8 g fat, 1,158 mg sodium
Stuffed Crust Cheese Lovers Pizza (2 slices)
2,018 kJ, 22.8 g fat, 1,000 mg sodium
Save up to 904 kJ, 12.6 g fat and 546 mg sodium.

KFC
Be careful at the Colonel’s. Most menu items are deep-fried and the closest you’ll get to a salad is mayonnaise-drenched coleslaw, so all you can really do is pick the best of a bad bunch.

Eat this
Original Recipe Fillet (1 piece) with a regular coleslaw
1,169 kJ, 10.3 g fat, 820 mg sodium
Original Burger
1,724 kJ, 14.5 g fat, 969 mg sodium

Not this
Original Recipe Chicken (2 pieces) and regular chips
3,023 kJ, 41.1 g fat, 1,283 mg sodium
Twister Wrap
2,446 kJ, 32 g fat, 1,200 mg sodium
Save up to 1,854 kJ, 30.8 g fat and 463 mg sodium.

Hungry Jack’s
Hungry Jack’s brings us the Whopper, Double Whopper and Ultimate Whopper, with a patty, cheese, another patty and yet more cheese. It’s a whopping big kilojoule hit. Stick to a single patty to keep your energy intake under control.

Eat this
Hamburger with Garden Salad
1,414 kJ, 11 g fat, 836 mg sodium
Garden Salad with Grilled Chicken and French dressing
791 kJ, 7.6 g fat, 955 mg sodium

Not this
Original Recipe Chicken (2 pieces) and regular chips
3,023 kJ, 41.1 g fat, 1,283 mg sodium
Ultimate Double Whopper
5,085 kJ, 80.5 g fat, 2,386 mg sodium
Save up to 4,294 kJ, 72.9 g fat and 1,431 mg sodium.

McDonald’s
While the golden arches don’t have the healthiest menu, they have introduced Heart Foundation Tick meals and salads. There’s also a seared chicken line, offering a more gourmet alternative to the usual burgers. Go easy on the sauces and opt for a salad instead of fries.

Eat this
Seared Tandoori Wrap
1,340 kJ, 7.5 g fat, 596 mg sodium
Hamburger with Garden Salad and Italian dressing
1,110 kJ, 8.8 g fat, 578 mg sodium

Not this
Crispy Chicken Bacon Deluxe with small fries
3,570 kJ, 41.7 g fat, 1,455 mg sodium
Mighty Angus Burger
2,870 kJ, 35.7 g fat, 1,360 mg sodium
Save up to 2,460 kJ, 32.9 g fat and 877 mg sodium.

Please note
All nutrition data is calculated per serve. The total daily intake for the average adult is 8,700 kJ, 70 g fat and 2,300 mg sodium. Needs vary depending on your gender, size and activity level. Nutritional data accurate as of May 2011; may vary slightly between states.
## 02. COMPARE FAST FOODS

### COMPARISON TABLE LIST

ALL tested products are listed

<table>
<thead>
<tr>
<th>NUTRIENT</th>
<th>A LITTLE (PER 100 G)</th>
<th>OK (PER 100 G)</th>
<th>A LOT (PER 100 G)</th>
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<tr>
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<td>≤ 3 g</td>
<td>3.1 g – 19.9 g</td>
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<tr>
<td>Saturated fat</td>
<td>≤ 1.5 g</td>
<td>1.6 g – 4.9 g</td>
<td>≥ 5 g</td>
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<tr>
<td>Sugars</td>
<td>≤ 5 g</td>
<td>5.1 g – 14.9 g</td>
<td>≥ 15 g</td>
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<td>Sodium</td>
<td>≤ 120 mg</td>
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### COMPARE PRODUCTS

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<th>TESTED PRODUCTS</th>
<th>Energy (kJ per 100 g)</th>
<th>Total fat (per 100 g)</th>
<th>Saturated fat (per 100 g)</th>
<th>Sugars (per 100 g)</th>
<th>Sodium (per 100 g)</th>
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<td>Perfecto Pepperoni Lovers (64 g per slice)</td>
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<td><strong>3.8</strong></td>
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<td>Rippa Sub 268 g</td>
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<td>Seafood Basket 293 g</td>
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<td>Grilled Chicken Breast Strip Pack (4 x strips) 160 g</td>
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<td>Grilled Chicken Fresco Salad 260 g</td>
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<td>Single Fillet Bondi Burger (without sauce) 145 g</td>
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<td>Veggie Burger 270 g</td>
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<td>Rappa 260 g</td>
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<td>Subway Six Inch® Sweet Onion Chicken Teriyaki Sub 260 g</td>
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<td>Subway Six Inch® Ham Sub 205 g</td>
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<td>Subway Six Inch® Meatball Marinara Sub (with cheese) 325 g</td>
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<td>Subway Six Inch® Italian BMT Sub (with cheese) 227 g</td>
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<td>Subway Six Inch® Veggy Patty Sub 255 g</td>
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<td>Original Recipe Fillet 83 g</td>
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<td>Potato and Gravy (regular) 110 g</td>
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<td>Original Burger 184 g</td>
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<td>Twister Wrap 230 g</td>
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<td>Regular Coleslaw 110 g</td>
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<td>Wicked Wings Snack Box 192 g</td>
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03. BURNING IT OFF

You know how the saying goes: a moment on the lips, a lifetime on the hips. If you’re keen to stick with unhealthy fast food choices, you’ll need to balance the kilojoule equation – whether that’s by abstaining from indulgences the next day or extra exercise. To give you an idea of the energy in some of the fast food options, we did some kilojoule crunching.

If you’re keen to stick with unhealthy fast food choices, you’ll need to balance the kilojoule equation – whether that’s by abstaining from indulgences the next day or extra exercise.

McDonald’s Double Quarter Pounder = more than 2.5 hours of constant house cleaning (definitely no breaks to watch Oprah!) or walking.

Hungry Jack’s Ultimate Double Whopper = 1.5 hour run or 3 hours of helping your friend move house (if you lift all the heavy boxes).

Wicked Wings Snack Box from KFC = almost 2 hours of cycling or 1.5 hours mowing the lawn.

Sangers and sushi

Almost half the members we surveyed buy lunch on the go up to twice a week. Your favourites are sandwiches and sushi.

At the sandwich shop

Most people would think a ham and cheese sandwich is a healthy lunch, but bread, ham and cheese are all high in sodium and it lacks nutrients.

➤ Opt for wholegrain bread over white or focaccia

➤ Ask for no butter, or substitute with avocado

➤ The more salad the better, and the more colours in the salad the more vitamins and minerals you’ll get

➤ Go easy on the cheese and avoid fried fillings and processed meats

➤ Choose mustard or vinaigrette over creamy sauces.

At the sushi bar

Japanese is one of the healthiest cuisines in the world, but the western palate has added some unfortunate twists such as processed cheese. Japanese cuisine can be high in sodium, which is linked with many health problems including high blood pressure and kidney disease.

➤ Cut back on the salty soy sauce – use wasabi for flavour

➤ Steer clear of tempura and battered or fried sushi fillings, and choose tuna, chicken or sashimi instead

➤ Give mayonnaise and processed cheese a wide berth – they’ll only add unwanted fat and kilojoules

➤ Miso soup is delicious but also very salty, so enjoy sparingly.
The average Australian family spends nearly 15 per cent of their food budget on fast food and/or take-away food. These foods are not always nutritious and excessive consumption may contribute to poor health.

Fast food and take-away food can often be high in:
- Saturated fat
- Salt
- Energy.

These foods can also be low in fibre, vitamins and minerals. Food items which have smaller volumes, but large surface areas such as french fries and chicken nuggets can absorb a substantial amount of fat per portion. This increases the energy density of the food and contributes to extra kilojoule intake.

Some fast food retailers are making changes to their cooking methods and ingredients, to improve the nutritional quality of their meals. Occasionally, choosing small portions of these items can be part of a balanced diet.

When choosing fast food or take-away items it is always best to opt for foods that are:
- Higher in fibre
- Lower in saturated fat
- Lower in salt.

HEALTHY OPTIONS

- Plain hamburgers with extra salad (skip the bacon, fried onion and fried egg)
- Small portions of gourmet-style pizzas (topped with vegetables, lean meat or seafood and opt for a thin crust)
- Jacket potatoes with creamed corn, baked beans or salad toppings
- Wholegrain sandwiches with lean meat and salad
- Grilled fish with a side salad
- Pasta with tomato-based sauces
- Sushi or Vietnamese rolls.

SMART EATING TIPS FOR TAKE-AWAY FOODS

- Always have some quick and easy meal ingredients so that you are less tempted to order take-away. Examples include pizza bases, pasta sauces, fresh vegetables, lean BBQ meats, lean mince and ready prepared lentils.
- When ordering take-away foods which are high in saturated fat and salt such as chips, fried chicken, fatty meats and cheese, choose smaller portions and request a side of salad or vegetables.
- Check what type of oil your food is cooked in and opt for healthier oils such as canola, sunflower or soybean oil.
- Instead of choosing a meal deal with chips and a soft drink, choose healthy accompaniments such as a side salad, corn cob, bread roll, fruit, yoghurt and opt for plain water.
- If lean, whole grain or reduced fat versions are available; these would generally be healthier choices.
- Choosing skin-free chicken or simply removing it can reduce the fat content of your meal.
- Ask for your burger with the sauce on the side so you can add a little yourself. Most fast food places will accommodate your personal preferences.

Take-away foods can be enjoyed as part of a healthy eating plan, provided they are consumed occasionally and in moderated portions.

An Accredited Practising Dietitian can assist you in making changes to your diet and can offer advice on nutritious alternatives to high fat, high salt take-away foods.

ENDNOTE

RECOMMENDED SERVES AND SERVING SIZES

Examples from across the various food groups provided by Measure Up

<table>
<thead>
<tr>
<th>RECOMMENDED SERVES</th>
<th>The Dietary Guidelines for Australian Adults recommends:</th>
<th>Cereals (incl. breads, rice, pasta)</th>
<th>Vegetables and legumes</th>
<th>Fruit</th>
<th>Dairy products</th>
<th>Lean meat, fish, poultry, nuts and legumes</th>
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<td>2 serves</td>
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<td>0-2.5 serves</td>
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<td>19-60 years</td>
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<td>4-9 serves</td>
<td>5 serves</td>
<td>2 serves</td>
<td>2 serves</td>
<td>1 serve</td>
<td>0-2.5 serves</td>
</tr>
<tr>
<td>60+ years</td>
<td></td>
<td>4-7 serves</td>
<td>5 serves</td>
<td>2 serves</td>
<td>2 serves</td>
<td>1 serve</td>
<td>0-2 serves</td>
</tr>
</tbody>
</table>


Meal plans showing how the recommended serves can be used over a day for the different groups can be found on the Healthy Weight website at www.healthyactive.gov.au. An alternative eating pattern which provides flexibility for preference across food groups is available in the Australian Guide to Healthy Eating.

Go to the ‘Frequently Asked Questions’ page at www.measureup.gov.au, How much fruit and vegetables should children eat? to find out how much fruit and vegetables children and adolescents should eat each day.

WHAT IS A SERVE?
Here are some examples of one serve for various food groups:

**Cereals, breads, rice, pasta, noodles**
- 2 slices of bread; 1 medium bread roll; 1 cup cooked rice, pasta, or noodles
- 1 cup porridge, 1 cup breakfast cereal flakes, or ½ cup muesli.

**Vegetables and legumes (choose a variety)**
- Starchy vegetables: 1 medium potato/yam, ½ medium sweet potato, 1 medium parsnip
- Dark green leafy vegetables: ¼ cup cabbage, spinach, silverbeet, broccoli, cauliflower or brussel sprouts
- Legumes and other vegetables: 1 cup lettuce or salad vegetables; ½ cup broad beans, lentils, peas, green beans, zucchini, mushrooms, tomatoes, capsicum, cucumber, sweetcorn, turnips, sprouts, celery, egglplant, etc.

**Fruit**
- 1 piece medium-sized fruit (e.g. apple, orange, mango, banana, pear, etc)
- 2 pieces of smaller fruit (e.g. apricots, kiwi, plum, figs, etc), about 8 strawberries, about 20 grapes or cherries, ½ cup (125 ml) fruit juice (sugar free), ¼ medium melon (e.g. rockmelon)
- Dried fruit e.g. 4 dried apricots or 1 ½ tablespoon sultanas
- 1 cup diced pieces/canned fruit.

**Milk, yoghurt, cheese and alternatives**
- 250 ml glass or one cup of milk (can be fresh, long life or reconstituted milk)
- ½ cup evaporated milk, 40 g (2 slices) cheese or 250 ml (1 cup) of custard
- 200 g (1 small carton) of plain or fruit yoghurt
- 1 cup of calcium-fortified soy milk, 1 cup almonds, ½ cup pink salmon with bones.

**Meat, fish, poultry and alternatives**
- 65-100 g cooked meat/chicken (e.g. ½ cup mince, 2 small chops, or 2 slices roast meat)
- 80-120 g cooked fish fillet
- 2 small eggs, ¼ cup cooked dried beans, lentils, chickpeas, split peas or canned beans, or ½ cup peanuts/ almonds.

**Extras**
Foods which we can occasionally include for variety. They are generally higher in fat and/or sugar, kilojoules, salt, etc.
- 1 medium slice of plain cake or 1 bun, 3-4 plain sweet biscuits, half a small chocolate bar, 60 g jam, honey (1 tablespoon), 30 g (½ small packet) potato crisps, 1 slice pizza = 2 extras
- 1 can soft drink or 2 glasses cordial, 2 scoops ice cream, 1 meat pie or pastry = 3 extras
- 2 standard glasses of alcohol (for adults only)
- 1 tablespoon (20 g) butter, margarine, oil.

Last updated 8 October 2010

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SEVEN GOLDEN RULES FOR HEALTHY EATING HABITS

1. Drink plenty of water
2. Eat more fruit and vegetables (at least two servings of fruit and five servings of vegetables every day)
3. Manage your portion sizes
4. Eat less processed food
5. Eat regular meals – don’t skip meals – and always eat a healthy breakfast (e.g. bowl of natural high-fibre cereal with sliced banana and low fat milk)

Try to limit foods that contain a lot of energy, such as cakes, biscuits, chocolate and high-fat snack foods.

6. Restrict your alcohol intake
7. Limit your intake of ‘extra’ food. These foods are not essential to provide the nutrients the body needs and some contain too much added fat, sugar and salt. Examples include lollies, chocolate, biscuits, cakes, pastries, soft drinks, chips, pies, sausage rolls and other take-aways. Choose these foods sometimes or in small amounts.

SNACK SUGGESTIONS

- Add fruit and/or yoghurt to low-fat milk and blend them together to make smoothies
- Fresh fruit and vegetables, dried fruit or an occasional handful of unsalted nuts make a good snack
- Fruit bread and wholegrain bread or toast with healthy spreads such as avocado or low-fat cream cheese, makes a filling, healthy snack
- Eat some low-fat yoghurt with fresh fruit
- Choose wholegrain breakfast cereal with low-fat milk
- Fruits such as oranges and grapes make delicious frozen snacks.

TIPS FOR GROCERY SHOPPING

- Prepare a shopping list and stick to it. Avoid grocery shopping when you are hungry
- Choose lean meats and trim the fat off meat. Try to limit processed meats (e.g. sausages or delicatessen meats such as bacon or salami) as they tend to be high in salt and saturated fat
- Try to limit foods that contain a lot of energy, such as cakes, biscuits, chocolate and high-fat snack foods
- Buy low-fat and unsweetened foods, but choose carefully. Some foods advertised as ‘lite’ or ‘fat-free’ may still be high in kilojoules
- Read the nutrition information panel on food, especially for fat, sugar, salt (sodium) and energy (calorie/kilojoule) level, when shopping
- Buy polyunsaturated or monounsaturated oils like sunflower oil and olive oil, or polyunsaturated and monounsaturated margarines for cooking rather than saturated fats such as butter or ghee

Buy low-fat and unsweetened foods, but choose carefully. Some foods advertised as ‘lite’ or ‘fat-free’ may still be high in kilojoules.

LEATHER COOKING OPTIONS

Cooking meals at home using healthier cooking methods, such as grilling, stir-frying, light microwaving or steaming are better options than deep-frying or prolonged boiling. Also consider using herbs and spices instead of salt for seasoning.
Kilojoules and fast food – the ‘in-your-face’ facts

Catherine Saxelby from Foodwatch explains that without public education about daily dietary intake, many people may have trouble understanding how the facts apply to them.

From 1 February 2011, all major fast food chains must display the kilojoule (calorie) counts of their food with the same prominence as the price. For instance, the Grand Angus has 2,630 kilojoules. This ‘in-your-face’ information is designed to make consumers take stock of what they, and their children, are eating.

US studies have shown that parents order healthier meals for their children when the kilojoule count of a food is displayed – although their own eating habits remain unchanged. A case of ‘Do as I say’, not ‘Do as I do’?

It’s not only the Macca’s, Pizza Huts, Pizza Havens, Eagle Boys and KFCs that have to comply. Any food outlet that has 20 or more outlets in NSW, or 50 or more nationwide, will have to display the average adult daily energy intake of 8,700 kJ plus the kilojoule content of their foods. They have a year to comply.

Kilojoule counts are also coming to Victoria by 2012. The NSW Heart Foundation supports the initiative but will lobby for the outlets to display the quantities of saturated fats and salt too.

It’s so easy to overdo it

Many people don’t realise that they can easily consume almost 50 per cent of their daily kilojoule allowance just by eating ‘a big hamburger’ plus ‘big fries’ e.g.

<table>
<thead>
<tr>
<th>Food</th>
<th>KJ</th>
<th>CALS</th>
<th>%DI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Big Mac</td>
<td>2,060</td>
<td>482</td>
<td>24%</td>
</tr>
<tr>
<td>Large fries</td>
<td>1,900</td>
<td>452</td>
<td>22%</td>
</tr>
<tr>
<td>Total</td>
<td>3,960</td>
<td>934</td>
<td>46%</td>
</tr>
</tbody>
</table>

Similarly, not many realise that a couple of doughnuts is not a mere snack but anywhere from 20 to 36 per cent of your day’s total depending on what sort you choose (cinnamon, cream-filled, iced, etc). And that’s before we tote up the thickshake or milky flat white you wash them down with.

Two doughnuts, cinnamon 1,726 kJ 20%
Two doughnuts, choc-iced, cream-filled 3,150 kJ 36%

Two reasons why I’m in favour of kilojoule counts:

1. Get you thinking and talking about how fattening most fast food is. It’s loaded with too many kilojoules, as well as too much saturated fats, trans fats and salt, and it’s served in super-sized portions. It’s easy to keep eating it once you start (‘passive over-consumption’). There’s little in the way of fibre, vegetables or whole grains to apply the brakes! Read the Fact Sheet on Fast Food on the Foodwatch website and you’ll see what I mean.

2. Allow you to compare and contrast the menu offerings easily. You can quickly run your eye over the kilojoules on a menu board and note what’s high and what’s low.

For example, if you can see that large fries have almost double the kilojoules of small fries, you can choose to opt for the small bag. Or seeing the kilojoules may help you downscale to a single burger instead of a double burger with extra cheese and a hash brown. Or – God forbid – a Tower Burger or Quad Stack.

Will it deter people from buying fast food?

I think not. If you are in a hurry and want to grab a quick meal on the road, you’re still going to pull over into the drive-through at a burger, pizza or chicken place. Only now the kilojoule counts may impose a little reflection before you purchase. How helpful this nanny-state government move will be in stemming the obesity problem remains to be seen.

While some early studies were favourable, other studies have reported that menu labelling has made no difference at all – which is a pity. For instance, experience in the US shows that forcing fast food chains to display nutrition labelling has done little to change people’s eating habits. Maybe that’s just the US. A simple logo identifying which foods are healthiest may be simpler and more effective.

Still got some questions?

This initiative, which I applaud, needs some explanations. Without an education program behind it, most people will have trouble understanding how the kilojoules apply to themselves. For example:

1. Who is an ‘average’ adult? Is it an average male or an average female? How close are you to the ‘average’?
2. And how do you decide how many kilojoules your 5-year-old daughter and 12-year-old son should have?
3. What’s a kilojoule anyway and how does it relate to calories? Many people still don’t understand kilojoules and think only in terms of calories.

The answers

I have put together a downloadable PDF at www.foodwatch.com.au that you can print out that provides you with the following:

1. A list of the kilojoules, calories and their % of Daily Intake for 85 of the most popular fast food and take-aways foods. It’s a pocket version of the list below.
2. The 8,700 kJ daily intake refers to an ‘average’ adult. This figure is used by food companies to calculate their % Dietary Intake figure on the thumbnails on food labels. Tables 2 and 3 in the PDF shows the intake for men and women of all ages for light physical activity.
Kids’ levels are harder to define. We’ve all seen two 7 year olds – one who’s tiny and the other who’s really tall. Should they both have the same intake? Table 4 in the PDF is an attempt to give you the broad averages from sedentary to sporty types.

3. A calorie = 4.186 kilojoules. A bit hard to remember! That’s why in the main Table 1 (below) you will find figures for 85 fast food items in both kilojoules with their calorie equivalent. If you ever find yourself without it and having to work it out for yourself just err on the side of caution and divide the kilojoules by 4 to get a rough estimate of the calories. For more on calories and kilojoules, read my handy article How to convert kilojoules to calories.

<table>
<thead>
<tr>
<th>FOOD</th>
<th>Kilojoules (kJ)</th>
<th>Calories (Cals)</th>
<th>% of your day’s rec. intake</th>
</tr>
</thead>
<tbody>
<tr>
<td>McDonald’s</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Big Mac</td>
<td>2,060</td>
<td>490</td>
<td>24%</td>
</tr>
<tr>
<td>Quarter Pounder</td>
<td>2,300</td>
<td>548</td>
<td>26%</td>
</tr>
<tr>
<td>Double Quarter Pounder</td>
<td>3,570</td>
<td>850</td>
<td>41%</td>
</tr>
<tr>
<td>Grand Angus</td>
<td>2,630</td>
<td>630</td>
<td>30%</td>
</tr>
<tr>
<td>Cheese Burger</td>
<td>1,190</td>
<td>283</td>
<td>14%</td>
</tr>
<tr>
<td>McChicken</td>
<td>1,710</td>
<td>407</td>
<td>20%</td>
</tr>
<tr>
<td>Filet-o-Fish</td>
<td>1,290</td>
<td>307</td>
<td>15%</td>
</tr>
<tr>
<td>Nuggets, 6</td>
<td>1,160</td>
<td>276</td>
<td>13%</td>
</tr>
<tr>
<td>Nuggets, 3</td>
<td>582</td>
<td>139</td>
<td>7%</td>
</tr>
<tr>
<td>Fries, large</td>
<td>1,900</td>
<td>452</td>
<td>22%</td>
</tr>
<tr>
<td>Fries, medium</td>
<td>1,540</td>
<td>368</td>
<td>18%</td>
</tr>
<tr>
<td>Fries, small</td>
<td>1,070</td>
<td>255</td>
<td>12%</td>
</tr>
<tr>
<td>Salads Plus</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Roast Chicken Salad w dressing</td>
<td>946</td>
<td>225</td>
<td>11%</td>
</tr>
<tr>
<td>Garden Mixed Salad w dressing</td>
<td>381</td>
<td>91</td>
<td>4%</td>
</tr>
<tr>
<td>Lean Beef Burger</td>
<td>1,250</td>
<td>298</td>
<td>14%</td>
</tr>
<tr>
<td>Berry nice Yoghurt Crunch</td>
<td>960</td>
<td>229</td>
<td>11%</td>
</tr>
<tr>
<td>Muffin Lite, raspberry</td>
<td>1,592</td>
<td>379</td>
<td>18%</td>
</tr>
<tr>
<td>Deli Choices</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bacon &amp; Egg Roll</td>
<td>2,080</td>
<td>495</td>
<td>24%</td>
</tr>
<tr>
<td>Chicken Tandoori Roll</td>
<td>1,400</td>
<td>333</td>
<td>16%</td>
</tr>
<tr>
<td>Thai Chicken Roll</td>
<td>1,480</td>
<td>352</td>
<td>17%</td>
</tr>
<tr>
<td>Turkey &amp; Cranberry Roll</td>
<td>1,730</td>
<td>412</td>
<td>20%</td>
</tr>
<tr>
<td>Chicken Caesar Roll</td>
<td>2,360</td>
<td>562</td>
<td>27%</td>
</tr>
<tr>
<td>Mustard Beef Roll</td>
<td>1,970</td>
<td>469</td>
<td>23%</td>
</tr>
<tr>
<td>Vegie Pesto Roll</td>
<td>1,370</td>
<td>326</td>
<td>16%</td>
</tr>
<tr>
<td>Burger King</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Whopper</td>
<td>2,940</td>
<td>700</td>
<td>34%</td>
</tr>
<tr>
<td>Whopper with Cheese</td>
<td>3,360</td>
<td>800</td>
<td>39%</td>
</tr>
<tr>
<td>Whopper with Bacon</td>
<td>3,003</td>
<td>715</td>
<td>34%</td>
</tr>
<tr>
<td>Whopper junior with Cheese</td>
<td>1,470</td>
<td>350</td>
<td>17%</td>
</tr>
<tr>
<td>Aussie Burger</td>
<td>2,727</td>
<td>649</td>
<td>31%</td>
</tr>
<tr>
<td>Vegie Burger</td>
<td>1,764</td>
<td>420</td>
<td>20%</td>
</tr>
<tr>
<td>Onion Rings, regular</td>
<td>1,344</td>
<td>320</td>
<td>15%</td>
</tr>
<tr>
<td>French Fries, small</td>
<td>966</td>
<td>230</td>
<td>11%</td>
</tr>
<tr>
<td>French Fries (regular)</td>
<td>1,512</td>
<td>360</td>
<td>17%</td>
</tr>
<tr>
<td>French Fries (large)</td>
<td>2,100</td>
<td>500</td>
<td>24%</td>
</tr>
<tr>
<td>Pizza, average</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deep pan (3 medium slices)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BBQ Meat Lovers, Pizza Hut, 291 g</td>
<td>3,558</td>
<td>847</td>
<td>41%</td>
</tr>
<tr>
<td>Super Supreme Dominos, 229 g</td>
<td>2,292</td>
<td>546</td>
<td>26%</td>
</tr>
<tr>
<td>Hawaiian</td>
<td>2,921</td>
<td>695</td>
<td>34%</td>
</tr>
<tr>
<td>Cheese Lovers</td>
<td>3,219</td>
<td>766</td>
<td>37%</td>
</tr>
<tr>
<td>Vegetarian</td>
<td>2,836</td>
<td>675</td>
<td>33%</td>
</tr>
<tr>
<td>Thin crust (3 medium slices)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BBQ Meat Lovers</td>
<td>2,524</td>
<td>601</td>
<td>29%</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Food</th>
<th>Calories</th>
<th>Kilojoules</th>
<th>Percent of RECOMMENDED DAY’S INTAKE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Super Supreme</td>
<td>2,349</td>
<td>559</td>
<td>27%</td>
</tr>
<tr>
<td>Cheese Lovers</td>
<td>2,346</td>
<td>559</td>
<td>27%</td>
</tr>
<tr>
<td>Hawaiian</td>
<td>2,579</td>
<td>614</td>
<td>30%</td>
</tr>
<tr>
<td>Vegetarian</td>
<td>2,007</td>
<td>478</td>
<td>23%</td>
</tr>
<tr>
<td><strong>Fried chicken</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 pieces of fried chicken</td>
<td>2,163</td>
<td>515</td>
<td>25%</td>
</tr>
<tr>
<td>Quarter chicken (leg)</td>
<td>1,422</td>
<td>339</td>
<td>16%</td>
</tr>
<tr>
<td>Quarter chicken (leg) and chips</td>
<td>3,248</td>
<td>773</td>
<td>37%</td>
</tr>
<tr>
<td>Chicken fillet burger</td>
<td>2,277</td>
<td>542</td>
<td>26%</td>
</tr>
<tr>
<td>Bacon and cheese fillet burger</td>
<td>2,479</td>
<td>590</td>
<td>28%</td>
</tr>
<tr>
<td>Bondi Burger (Oporto)</td>
<td>2,257</td>
<td>537</td>
<td>26%</td>
</tr>
<tr>
<td>Rooster Roll (Red Rooster)</td>
<td>2,735</td>
<td>651</td>
<td>31%</td>
</tr>
<tr>
<td>Nuggets, 6</td>
<td>1,230</td>
<td>293</td>
<td>14%</td>
</tr>
<tr>
<td>Chips, regular</td>
<td>1,508</td>
<td>359</td>
<td>17%</td>
</tr>
<tr>
<td>Mashed Potato and Gravy (KFC)</td>
<td>504</td>
<td>120</td>
<td>6%</td>
</tr>
<tr>
<td>Twister Wrap (KFC)</td>
<td>2,446</td>
<td>582</td>
<td>28%</td>
</tr>
<tr>
<td>Popcorn Chicken (large, KFC)</td>
<td>2,352</td>
<td>560</td>
<td>27%</td>
</tr>
<tr>
<td><strong>Subway Cold subs</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6” Turkey</td>
<td>1,160</td>
<td>276</td>
<td>13%</td>
</tr>
<tr>
<td>6” Turkey Breast &amp; Ham</td>
<td>1,160</td>
<td>276</td>
<td>13%</td>
</tr>
<tr>
<td>6” Roast Beef</td>
<td>1,150</td>
<td>274</td>
<td>13%</td>
</tr>
<tr>
<td>6” Subway Club</td>
<td>1,210</td>
<td>288</td>
<td>14%</td>
</tr>
<tr>
<td>6” Tuna</td>
<td>1,660</td>
<td>395</td>
<td>19%</td>
</tr>
<tr>
<td><strong>Subway Hot Subs</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6” Roasted Chicken</td>
<td>1,280</td>
<td>305</td>
<td>15%</td>
</tr>
<tr>
<td>6” Turkey Ham &amp; Bacon Melt</td>
<td>1,530</td>
<td>364</td>
<td>18%</td>
</tr>
<tr>
<td>6” Meatball</td>
<td>2,080</td>
<td>495</td>
<td>24%</td>
</tr>
<tr>
<td>6” Cheese Steak</td>
<td>1,510</td>
<td>360</td>
<td>17%</td>
</tr>
<tr>
<td>6” Italian BMT</td>
<td>1,880</td>
<td>448</td>
<td>22%</td>
</tr>
<tr>
<td><strong>Subway Salads with Ranch dressing</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Roasted Chicken</td>
<td>813</td>
<td>194</td>
<td>9%</td>
</tr>
<tr>
<td>Club</td>
<td>783</td>
<td>186</td>
<td>9%</td>
</tr>
<tr>
<td>Tuna</td>
<td>1,206</td>
<td>287</td>
<td>14%</td>
</tr>
<tr>
<td>Veggie Delite</td>
<td>500</td>
<td>119</td>
<td>6%</td>
</tr>
<tr>
<td><strong>Take-aways</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sushi, average all types, per 6 pieces</td>
<td>1,170</td>
<td>280</td>
<td>13%</td>
</tr>
<tr>
<td>Sausage roll with sauce</td>
<td>2,010</td>
<td>479</td>
<td>23%</td>
</tr>
<tr>
<td>Meat pie with sauce</td>
<td>1,655</td>
<td>394</td>
<td>19%</td>
</tr>
<tr>
<td>Steak sandwich</td>
<td>1,498</td>
<td>357</td>
<td>17%</td>
</tr>
<tr>
<td>Fish ‘n’ chips</td>
<td>3,760</td>
<td>895</td>
<td>43%</td>
</tr>
<tr>
<td>Grilled fish with chips</td>
<td>2,580</td>
<td>614</td>
<td>30%</td>
</tr>
<tr>
<td>Doughnuts, Krispy Kreme, 2 Original Glazed</td>
<td>1,908</td>
<td>454</td>
<td>22%</td>
</tr>
<tr>
<td>Doughnuts, Krispy Kreme, 2 Cinnamon</td>
<td>1,726</td>
<td>411</td>
<td>20%</td>
</tr>
<tr>
<td>Doughnuts, Krispy Kreme, 2, Choc-iced</td>
<td>2,370</td>
<td>564</td>
<td>27%</td>
</tr>
<tr>
<td>Doughnuts, Krispy Kreme, 2 Choc-iced Cream-filled</td>
<td>3,150</td>
<td>750</td>
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</tr>
<tr>
<td>Doughnuts, Donut King, Cinnamon, 2</td>
<td>1,520</td>
<td>362</td>
<td>19%</td>
</tr>
<tr>
<td>Muffin, Muffin Break, Berry Crunch Hi-fibre</td>
<td>2,540</td>
<td>606</td>
<td>29%</td>
</tr>
<tr>
<td>Muffin, Muffin Break, Apple Berry Bran</td>
<td>2,060</td>
<td>492</td>
<td>24%</td>
</tr>
<tr>
<td>Cookie, Muffin Break, Chocolate Chip Regular, 97 g</td>
<td>1,970</td>
<td>470</td>
<td>23%</td>
</tr>
<tr>
<td>Cookie, Muffin Break, Chocolate Chip Jumbo, 200 g</td>
<td>4,030</td>
<td>963</td>
<td>46%</td>
</tr>
<tr>
<td><strong>RECOMMENDED DAY’S INTAKE</strong></td>
<td>8,700</td>
<td>2,000</td>
<td></td>
</tr>
</tbody>
</table>

Source: Analyses from fast food chains and take-away shops. Pizza figures average of national chains including Pizza Hut, Pizza Haven, Dominos and Eagle Boys

* Based on the recommended day’s intake for an average adult. To work out calories, divide kilojoules by 4.186 or simply 4.
The final report of the Review of Food Labelling Law and Policy – *Labelling Logic* – was released on 28 January 2011. Also known as the Blewett Review, after its Chair Dr Neal Blewett, the report made a total of 61 recommendations addressing issues around policy, public health and food safety, presentation, and compliance and enforcement.

The food label was identified as a key focus area by the review panel, due to its role as a primary communication channel between suppliers and consumers.

Recommendations for future food labelling law and policy were made by balancing:
- Consumer need for information
- Industry need for marketing flexibility and minimal regulatory burden, and
- Government objectives in the area of individual and public health.

### WHAT ARE THE RECOMMENDATIONS?

Summaries of some of the relevant recommendations from the *Labelling Logic* report can be found below.

#### Food labelling regulation

A number of the report’s recommendations seek to create a regulatory framework for food labelling, alongside voluntary actions, which will be industry led.

The report recommends:
- That the Government introduce a national Food Labelling Bureau (Recommendation 61)
- That consumer protection should become a higher priority for government agencies, and should be given the appropriate level of resources for proper monitoring and enforcement (Recommendations 4, 57 and 59)
- Finalisation of the Standard for nutrition, health and related claims on food labels (Recommendation 20)
- The introduction of a voluntary code of practice and education initiatives to enable consumers to quickly identify label information relating to additives, colourings and flavourings (Recommendation 11).

The report recommends that disclosure of specific added sugars, added fats, added vegetable oils, and total and naturally occurring fibre, should be mandatory on Nutrition Information Panels.

#### Traffic light labelling

The report’s recommendations for the introduction of a multiple traffic lights front-of-pack labelling system (Recommendation 50) has generated a lot of interest from media, industry bodies and consumers.

The report recommends the voluntary introduction of the traffic light labelling system in the first instance, with the exception of food products where general or high level health or nutrition claims are made. In these cases, traffic light labelling will be mandatory.

#### Nutrition information panels

The report addressed wider issues surrounding nutrition labelling, including the level of detail required on Nutrition Information Panels. The report recommends that disclosure of specific added sugars, added fats, added vegetable oils, and total and naturally occurring fibre, should be mandatory on Nutrition Information Panels (Recommendations 12 and 14).

For more information on how to read a Nutrition Information Panel, go to [www.parentsjury.org.au](http://www.parentsjury.org.au)
Food labelling in chain food restaurants

Food labelling on menus and menu boards were addressed in the report, and the following recommendations were made:

➤ Declaration of energy content of standardised food should be mandatory on menus and menu boards in chain food service outlets, and on vending machines (Recommendation 18).

➤ Chain food service outlets should be encouraged to display the multiple traffic lights labelling system on menus/menu boards. This should be a mandatory requirement where general or high level health claims are made on food content (Recommendation 54).

The government’s response

In December 2011, the Federal Government announced it would not support traffic light labelling on food. Instead, it proposed developing front-of-pack labelling with easy to understand nutritional information.

Its Forum on Food Regulation will consult with representatives from health organisations, industry and consumer groups to develop the new system.

Once the design and content of the labelling is decided, companies may be given up to two years to implement the changes.

The Parents’ Jury will continue to keep you informed of the progress of this issue.

WHAT DOES THE PARENTS’ JURY WANT TO SEE?

In 2011, we surveyed members to find out what you thought about multiple traffic light labelling and if it should be introduced on a mandatory basis. We received 250 responses, with over 90 per cent of you stating your support for its mandatory introduction. Over 91 per cent of respondents want to see this labelling across all packaged food products and 90 per cent believing it should be extended to cover all items on the menu boards in fast food outlets.

Many of you also provided comments. Here are some of your thoughts, which have featured in our official response to the Review.

“I hope our government will listen to consumers rather than the food industry. I can’t understand why food industry is so resistant to traffic light labelling when they happily put %RDI’s which is complex and time consuming compared to traffic light labelling.”

“Much easier to understand and helps (us) choose healthy foods, than trying to work out %DI % which means absolutely nothing to most people.”

“It’s such a great concept! A simple way that we can teach our kids to consider what they are eating, and hopefully develop a healthier generation of teens and adults. It has wins all round: food production companies would hopefully take more personal responsibility. There would be a greater awareness for all families, no matter their level of education, and we could set our kids up to be looking after their health by watching what they eat. We will be doing future generations a service by educating them about how food affects their health.”
TRAFFIC LIGHT LABELLING – THE EVIDENCE

The Australian Medical Association urges the Federal Government to reconsider its decision not to support traffic light labelling for packaged foods and beverages

A MA President, Dr Steve Hambleton, has today written to Health Minister Nicola Roxon, Parliamentary Secretary for Health and Ageing Catherine King, and Minister for Agriculture Senator Joe Ludwig, sending them an AMA brochure that provides compelling evidence that traffic light labelling is effective and explains how the system would work in practice.

The brochure has also been sent to all members of the Australia and New Zealand Food Regulation Ministerial Council ahead of the Council’s meeting on 9 December.

“The Ministers have either been misled about the evidence, or ignored it,” Dr Hambleton said.

“There is a very strong case for traffic light labelling to be introduced in Australia, and it is outlined in our brochure, Traffic Light Labelling: Making healthy food choices easier for Australians.

“The brochure puts the case for traffic light labelling into proper perspective when compared to alternatives such as the Percentage Daily Intake approach favoured by the food industry.

“And it also explains why a regulated approach to food labelling is more effective than a voluntary approach.

“If the decision was left to manufacturers, traffic light labels might appear on some products, but not others. Others might decide not to use these labels at all, or maybe for a short time.

“A voluntary approach would lead to unpredictability, inconsistency, public confusion, and failure.

“There is a behaviour change dimension to the traffic light system – it’s not about banning certain foods, but getting people to become aware of healthier alternatives and considering them.

“The traffic light system would need to be implemented in conjunction with a strong and ongoing public education campaign and point of sale information.

“The AMA urges the Ministerial Council to not let myths and misunderstandings get in the way of the evidence for a traffic light food labelling system.

“The facts are clear – without this system, the community will continue to pay the rising health cost of poor food choices.”


The AMA’s analysis of the current evidence regarding Traffic Light Labelling can be found at http://ama.com.au/traffic-light-labelling-the-evidence

Traffic light labelling – how it works

There is sometimes misunderstanding and unwarranted fear about traffic light food labels, and especially what the red lights mean.

The purpose of a red traffic light label on a product isn’t to send the message ‘don’t ever consume this’. The message is to be aware of the content of the product, consume it in moderation, but also keep in mind the other amber and green light alternatives within that product range, which could be, for example, low-fat alternatives.

Full-fat milk might have an amber light or even a red light on it for fats (and, of course, green for sugar and for salt). But there are many varieties of milk that are low-fat (green light), which could be chosen as the healthier options.

Similarly, Diet Coke might have a green light because, compared to regular Coke, it is a healthier alternative. This makes complete sense under the traffic light system.

Media release, 5 December 2011
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INDUSTRY WELCOMES FOOD MINISTERS’ LABELLING DECISION

Industry welcomed the decision of the majority of State and Territory Governments to support the Federal Government’s position on food labelling, including to reject traffic light labels, announced the Australian Food and Grocery Council

The meeting supported the Commonwealth’s decision on opposing traffic light front-of-pack labels, announced on November 30. AFGC Chief Executive Kate Carnell said: “As previously stated, Australia’s food and grocery manufacturing industry is happy to work with the Forum on Food Regulation to look at global evidence on developing a preferred approach to a single, front-of-pack food labelling system.

“The recently released Institute of Medicine report, commissioned by United States Government, as well as the work done by EUFIC in Europe may be good starting points,” Ms Carnell said.

Ms Carnell said industry also welcomed the Forum’s position to instruct FSANZ to undertake broad consultation on a draft standard for health claims before a final standard is presented to Ministers next year.

“This position was requested by industry and we look forward to working with FSANZ on this issue,” Ms Carnell said.

Industry also welcomed the development of a National Nutrition Policy, and recommended that this should be aligned and integrated with the Federal Government’s National Food Plan, which is being developed.

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Media release, 9 December 2011

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Traffic light labelling: making healthy food choices easier for Australians

It’s time to improve food choices and tackle obesity with a traffic light system of front-of-pack labelling, according to this fact sheet from the Australian Medical Association

Australia has one of the highest rates of obesity in the world, and it continues to grow. A growing number of Australians are at high risk of serious diseases and premature death from the epidemic of obesity occurring in Australia.

Obesity is a significant health problem globally, but especially in Australia. Over one quarter of the world’s population is overweight or obese (28.6 per cent). In comparison, an alarming two-thirds of adult Australians are overweight or obese (62 per cent), and Australia has the fifth highest rate of adult obesity among all OECD countries (25 per cent of adults). According to recent National Health Surveys, these Australian rates continue to rise.

Australia’s children are also at risk. Twenty-three per cent of Australian children between 2 and 16 years of age are obese or overweight. These children are very likely to become obese as adults, and experience serious health conditions such as type 2 diabetes, cardiovascular disease, high blood pressure and a range of cancers.

There are high rates of these health conditions in Australia, and they have significant social and personal costs. In 2005, an estimated $1.6 billion was borne by State and Federal Governments as a result of obesity.

The food people consume is a major factor in obesity. It needs to be easier for people to make healthier choices about what they eat.

There is an emerging view among experts that the global decline in people’s level of physical activity is insufficient to explain the rise in obesity. However, there is a strong global correlation between rising rates of obesity and changes in the food supply system, which is producing food products that are more processed, cheaper, and more effectively marketed than ever before.

People have become busier and less engaged with growing and preparing foods and, as a result, are more dependent on manufactured foods. This often means people are consuming more energy overall, and high levels of problem ingredients such as saturated fats, salt and sugar which are found in many highly processed foods.

Tackling rising rates of obesity in Australia requires improving our patterns of food and drink consumption. Consumers need to be empowered to choose healthy food options.

To make healthier food choices, people need effective food labelling that provides the right health information in the right way.

Many consumers say they lack the time to read food labels. Research shows that consumers will, on average, spend between four and ten seconds choosing a product from the supermarket shelf, and will ignore information on labels altogether if it is too complex or detailed.

When making purchasing decisions, consumers are often faced with an overwhelming array of products and options within product categories. The big problem for the vast majority of Australians is knowing which of these foods and drinks, and in what amounts, are appropriate, and which are not.

Food labels are often used by manufacturers to make their products more appealing, by highlighting price, taste, healthiness or other claimed benefits. Nutritional information has to compete with these for consumers’ attention. Effective nutritional food labelling must be readily seen and easy to understand, to help people make quick and accurate comparisons.

Making the best choices means being able to easily compare the healthiness of different products.
and brands, and to separate out the relevant health information from the marketing hype.

Current food labelling in Australia fails the test and needs to be changed.

Most packaged foods and drinks in Australia are required to display the Nutritional Information Panel. This little panel provides information on energy, protein, total fat, saturated fat, total carbohydrate, sugar, and sodium, in both 'per serve' and 'per 100 gm/ ml' measures. The Nutritional Information Panel includes a listing of ingredients, and may also provide allergen information. It is not usually placed in a prominent position on the product label, and text can be small, particularly on small packages.

Studies show that many consumers find the Nutritional Information Panel too technical, difficult to understand, and confusing, if not misleading. Information based on the Nutritional Information Panel’s serving sizes does not always reflect real life consumption patterns.

Front-of-pack labelling is the right approach, but not all forms are effective.

Surveys show that Australian consumers prefer a single approach to labelling, which should be on the front of the pack, with health information that can be easily interpreted and compared and conveyed immediately.

The Percentage Daily Intake system of 'thumbnails' indicates the contribution of energy, protein, total fat, saturated fat, total carbohydrate, sugar, and sodium, provided by the serve of food as a percentage of the daily recommended intake (based on the estimated nutrient intake for a 70 kg adult male). This system has been voluntarily adopted by a number of food producers.

However, a survey conducted on behalf of the Australian Food and Grocery Council found that while three quarters of surveyed consumers had heard of the Percentage Daily Intake system, the majority had not used it to make a purchasing decision, and nearly half believed that Percentage Daily Intake did not provide the type of nutritional information they needed to make a decision. Research conducted by the food producer Sanitarium shows the Percentage Daily Intake system to be the least preferred, least understood and least useful approach to front-of-pack labelling. Other research on the Percentage Daily Intake shows that consumers do not find the information meaningful enough for a good decision, and the typically small size makes the thumbnail virtually unnoticeable.

It’s time to improve food choices and tackle obesity with a Traffic Light system of front-of-pack labelling.

The Traffic Light system of labelling provides easily interpreted information using colour codes. Red, amber and green ‘traffic light’ shapes on the front of food packages show consumers, at a glance, whether a product is high, medium or low in fat, saturated fat, sugar, and salt (and possibly overall energy). This makes it easy to identify healthier food choices (green or amber lights, rather than red). Traffic Light Labels can be represented in a number of ways on food packets, but their meaning will always be clear. They can also be supplemented with other nutritional or Percentage Daily Intake information.

Traffic Light Labels enhance the ability of consumers to make healthier food choices. When comparing similar food products, consumers are five times more likely to correctly identify the healthier products when using Traffic Light Labels compared
to a Percentage Daily Intake system. Consumers also report being able to compare products and make these judgements much faster when products have Traffic Light Labels.

This system of labelling also commands high levels of understanding and acceptability across ethnic and income groups, which is consistent with the Food Regulation Ministerial Council Front of Pack Labelling Policy Statement 2009. Traffic Light Labels would be particularly beneficial for consumers with different language backgrounds.

Traffic Light Labelling has the capacity to benefit the entire population by increasing overall consumer demand for healthier products. Following the introduction of Traffic Light Labels in the UK, sales of breakfast cereals with green and amber lights grew twice as fast, and pre-prepared frozen meals with red lights experienced a 35 per cent decrease in sales.

These early outcomes show that Traffic Light Labelling has the potential to change our patterns of food supply and consumption – which is exactly what is needed to halt the rising rates of obesity in Australia.

The benefits of the Traffic Light Labelling system have also been recognised in 2011 by the independent Panel for the Review of Food Labelling Law and Policy commissioned by the Australia and New Zealand Food Regulation Ministerial Council.

**The health of Australians should not be left to the whims and decisions of food manufacturers.**

It should not be left to food manufacturers to decide if they want to use Traffic Light Labels.

If the decision is left to manufacturers, Traffic Light Labels might appear on some products, but not others. Others might decide not to use these labels at all, or maybe for a short time.

Representatives of the food industry currently favour Percentage Daily Intake labels, and some manufacturers are using it already, despite its shortcomings. All of this means that a voluntary approach will lead to unpredictability, inconsistency, public confusion and failure. The strong promise of a successful system such as Traffic Light labels should not be jeopardised in this way. The health of Australians should not be left to the whims and decisions of food manufacturers.


The facts are clear. The AMA believes that the Government must mandate traffic light labelling on packaged food and drink products. Without this system, the community will continue to pay the rising price of poor food choices.

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Nutritional labels on food packaging empower consumers to make healthier and more informed food choices. But like other measures taken for public health, food labelling also has its critics. There’s clear evidence that we have a major problem with obesity in Australia, with two in three adults and one in four children now overweight or obese. So giving people the chance to make healthy food choices – with clear labelling of menus and food packaging – is more important than ever.

SIMPLIFYING THE LANDSCAPE

But Chris Berg from the Institute of Public Affairs recently argued on ABC’s The Drum website that menu labelling doesn’t work.

Berg cites a study of menu labels in New York fast food chains that showed only a minority of customers changed their purchasing to items with fewer calories. Success was restricted to Subway, which already promoted itself as a healthier fast food choice.

He concludes that overall there was no decline in calories purchased. What he fails to mention is that menu labelling was in fact effective for several New York fast food chains, which recorded a significant reduction in calorie intake.

Berg cites other examples where changes in behaviour have been minimal. But the issue is not black and white as he makes out.

Consumption patterns and responses to initiatives such as menu labelling vary according to a range of factors.

IMPORTANCE OF COMPREHENSIBILITY

The success of menu labelling in isolation will be limited particularly if consumers’ understanding of calorie or energy intake is poor.

The current nutrition information panels on the back or side of packaged foods, for instance, are difficult to read and require an understanding of what kilojoule (kJ) per 100 grams means or worse, what kJ per ‘serve’ means when serve is an uncertain quantity.

Consumers may also be fooled by marketing of products highlighted as ‘low-fat’, which are nonetheless high in sugar, or vice versa.

Comprehensible labels are clearly required on the front of food packaging or on menus so consumers can know the total fat, saturated fat, sugar and sodium content of the food.

Obesity is a recent public health problem so the evidence on reversing it is still evolving. The only way to build that evidence base is to continue trialling and evaluating public health measures that show potential for success.

And it is clearly erroneous to argue that just because one type of label may not have had a massive impact in one instance, all labels are bound to fail.

ALL SHAPES AND SIZES

There are many suggestions for types of labels that should be tried. Cancer Council Australia favours a ‘traffic light’ system where red would signal high, amber moderate, and green low for fat, salt and sugar.

In collaboration with other public health and consumer organisations, the Cancer Council conducted 790 intercept surveys at shopping centres using mock food packages.

Consumers were five times more likely to identify healthier products using the front-of-pack traffic-light system compared with the standard single colour system displaying ingredients as a percentage of daily intake.

This result is supported by research from New Zealand and the United Kingdom.

What’s more, Labelling Logic, the report from the independent Blewett review of food labelling, recommends a traffic-light system.

But the food industry in Australia has instituted front-of-packet labels with single colour boxes showing fat, sugar and sodium as percentage of daily intake. These numbers are difficult to interpret and relate to an ‘average’ adult.

It’s also a system that encompasses a different philosophy to the traffic-light system because it encourages intake – even if limited – while red traffic lights discourage intake of unhealthy foods.
Percentage of daily intake suggests that any food item with less than the recommended daily intake can still be consumed despite the fact it may have very high levels of fat, sugar, salt or calories and should be avoided.

The food industry is releasing data on the percentage of labelled products but there’s little point in statistics if the labels are not understood by consumers.

BEGINNINGS AND ENDINGS

We also need to be careful about how we measure success of any food labelling system.

A study from the United Kingdom, for instance, showed traffic-light labelling on ready meals and sandwiches had no impact of the healthiness of products purchased.

But only 4 per cent of the total range of products had been labelled and the assessment was done just four weeks after labelling.

An indication of a true measure of success would require the labels being around for months or years, even in conjunction with an education campaign because changing established behaviours takes a long time.

The first thing to be measured should be whether consumers can understand the labelling system and distinguish healthy and unhealthy foods. Over time, we could measure purchasing patterns to see if there was a move towards healthier foods.

Another powerful measure of success would be to see how many products with red traffic lights are reformulated.

It can be safely assumed that food manufacturers would try to avoid red traffic light labels on their products because they may decrease sales. Any such changes to unhealthy products would bring an additional benefit.

The endgame of food labelling is to curb the rates of obesity and obesity-related chronic diseases in the population. Surely it’s a goal worthy enough to accurately test the efficacy of food labels before deciding that labels don’t work based on the misinterpretation of one study.

Ian Olver is Clinical Professor of Oncology at Cancer Council Australia.

Opinion first published at The Conversation, 7 October 2011
http://theconversation.edu.au

Obesity Policy Coalition | www.opc.org.au

NINE IN TEN CONSUMERS GIVE TRAFFIC LIGHT LABELS GREEN LIGHT

➤ New research reveals 87% of grocery buyers in favour of traffic light labelling
➤ Obesity Policy Coalition launches traffic light labelling app and advocacy campaign
➤ Public health experts and consumers give feedback on Blewett labelling review at roundtable discussion

Research released today by the Obesity Policy Coalition (OPC) reveals Australian grocery buyers are overwhelmingly (87%) in favour of clearer nutrition labels on packaged food in the form of traffic light ratings. * Jane Martin, senior policy advisor for the OPC, said consumers were sick of confusing and potentially misleading nutrition claims, like ‘fat-free’ on sugar-laden products, and had a right to clear information so they could make an informed choice about the foods they buy.

“Our research shows consumers want to know how much salt, sugar, saturated fat and total fat, is in the products they buy. Traffic light labels provide this information at a glance, and help shoppers sort the fat from the fiction,” Ms Martin said.

Traffic light labelling has the support of former Federal Health Minister Dr Neal Blewett. Dr Blewett chaired an expert group who conducted an independent review of food labelling law and policy in 2010. Their report, Labelling Logic, recommends placing front-of-pack traffic light labels on packaged food to help consumers make healthier choices.

To demonstrate how traffic light labels could work, the OPC has developed an application (‘app’) for smart phones and tablets – the Traffic Light Food Tracker. The app gives a traffic light rating of high – red, medium – amber or low – green for the amount of sodium, sugars, total fat and saturated fat per 100 g in packaged foods.

The OPC encourages people to download the app from either the Apple Appstore or Android marketplace and to support clearer food labelling by emailing their state health minister, all of whom are members of the ministerial council tasked with reviewing the recommendations in Dr Blewett’s Labelling Logic report. Emails can be sent through the OPC’s website: www.opc.org.au

The launch today takes place ahead of the second Public Health and Consumer roundtable discussion, during which stakeholders are invited to give their response to the recommendations.

“We hope that members of the Council will take into account both the strong public support and the recommendations in Dr Blewett’s report, and decide to make traffic light labelling mandatory on all packaged food,” Ms Martin said.

Michelle Winchester, a parent of three and advocate for The Parents’ Jury, said clearer food labelling would help parents cut through marketing hype and understand and compare the nutrition quality of foods.

“As a parent I know how easy is to be swayed by nutrition claims, particularly on foods marketed towards children. I want to be able to easily identify the nutritional content of the food I buy, in order to make the best choices for me and my family.

“Traffic light labels would show me this information at a glance. It would also help me teach my children to cut through the packaging hype and make healthier choices themselves!”

* Research carried out by the Centre for Behavioural Research in Cancer at Cancer Council Victoria. A total of 1,521 Australian adults, who identified themselves as the main grocery buyer for their household, were surveyed, from all states and territories, in both rural and metro areas.
FOOD INDUSTRY DIGS IN HEELS OVER TRAFFIC LIGHT LABELS

There should be increased support for objective research and analysis in relation to agreed outcomes for such an important public health issue, suggests Timothy Gill

THE CONVERSATION

The fight over how to label our food has never been more intense. On one side of the argument we have public health associations, non-governmental organisations (NGOs) and consumer groups looking for effective solutions to address the growth of lifestyle diseases, including obesity, diabetes and cardiovascular disease. On the other side are the food industry associations eager to reassure consumers about the nutritional value and quality of their products.

What is not in dispute is that labels play an important role in providing information to consumers at the time when they are making crucial decisions about purchase and consumption.

Consumer demands for information provided on packaged food range from safety, composition, allergens, country of origin, nutritional merit, as well as information about how the food was produced.

However, label real estate is at a premium, and there are also certain requirements imposed by national and international regulations that food labels must meet.

THE FOOD LABEL REVIEW AND ITS RECOMMENDATIONS

To help provide some clarity to both consumers and food manufacturers, the Australia and New Zealand Food Regulation Ministerial Council set up the National Review of Food Labelling in October 2009 to examine the structure, format, accuracy and appropriateness of information on food labels.

The review panel chaired by Dr Neil Blewett undertook a comprehensive investigation and an extended consultation process during which more than 6,000 submissions were received. The panel released their report in January 2011.

It made a series of 61 generally well-received recommendations. A primary recommendation related to defining an issues hierarchy to guide development of food labelling policy. For the first time, preventive health was identified as a primary issue of concern in the hierarchy – just below food safety and above new technologies and consumer values issues.

As a result, a number of the recommendations related to nutrition quality issues, including the need for a simple interpretative front-of-pack nutrition labelling system and a clear preference for the use of a traffic light system.

Unsurprisingly, the recommendations relating to the traffic-light labelling system were immediately rejected by the Australian Food and Grocery Council (AFGC).

The AFGC has been agitating for some time against the adoption of such a system, preferring instead to promote their own Dietary Intake Guide (DIG) labelling system.

The food industry does not oppose the introduction of front-of-pack nutrition information but rejects the traffic light labelling system. They claim the system is simplistic and liable to ‘unfairly’ classify many foods as nutritionally inappropriate.

WHICH LABEL?

The argument over which front-of-pack labelling system should be adopted has been raging for some time, but was escalated in 2006 when the Australia New Zealand Food Regulation Ministerial Council asked for the establishment of a Front of Pack Labelling Working Group.

Most public health-related associations, NGOs and consumer organisations support the use of the multiple traffic light system and the food industry became concerned that this may become the preferred or default system of front-of-pack labelling in Australia.

They reacted by producing their own labelling systems based on the percentage of the recommended intake levels for specific nutrients that each food product provides.

A plethora of such systems began to appear on the front of packaged foods in Australia around this time, with each system carefully constructed to present the best attributes of the particular product. Eventually the AFGC was able to convince the industry to develop a uniform front-of-pack labelling system – DIG.

The AFGC would like this system to be widely adopted so governments find it difficult to roll it back or impose any other system. A number of AFGC member companies have adopted the DIG system and over 3,000 products now use this way to provide nutrition information.

TRAFFIC LIGHTS EXPLAINED

Traffic light guides have been used for many years as an educational tool to indicate the nutritional merit of certain foods. The United Kingdom Food Standards Authority (FSA) first proposed a formalised colour-coded traffic-light system for front-of-pack labelling in the early 2000s. It was based on a program of work from Oxford University, which examined the most effective ways to provide a simple profile of the nutritional value of food products.

The system categorises the four key nutrients most associated with public health issues – fat, saturated fat, sugars and salt – as high, medium or low compared to the recommended level of intake of these nutrients.

These ranks are portrayed as red, amber or green traffic lights on the package. Another light is sometimes included in the signpost for energy content, but it is not a core criterion.

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As the UK is subject to European food regulations, the FSA could only recommend that manufacturers voluntarily adopt the traffic light labelling system.

Its recommendation was initially taken up with support by the major supermarket chains whose own brand products control a large portion of the UK food market. Although some UK supermarkets have now developed their own front-of-pack labelling systems, over 10,000 products still use the Food Standard Authority's traffic light system.

The traffic light system is designed to promote a comprehensible message of moderation by encouraging consumers to select food items with more green or amber lights and limit those with red lights. Sales data from the UK suggests this system may be effective, despite choices also being influenced by other factors such as price and promotion.

For instance, sales of breakfast cereals with mainly green lights or amber lights are growing twice as fast as breakfast cereals in total, and frozen meals with red lights on the label have experienced a 35 per cent decrease in sales. Similar effects on sales have been reported for other products.

**THE HEART OF THE MATTER**

Amid the heat, it is easy to lose sight of the aim of a food labelling system. In practice, food labelling may be used as a persuasive promotional tool, or to provide useful information to consumers on the nutritional status of a product.

Research around which system is of most benefit to consumers is mixed and can often be confusing because different studies pose different questions, are conducted within different samples of consumers and produce results that appear contradictory.

What’s more, much of the recent research on this issue has been undertaken or funded by food industry groups and this work tends to support the industry’s preferred DIG approach.

Both systems have benefits and limitations. When asked directly which system they prefer, consumers may opt for the DIG approach on the basis that they feel it provides more information.

However, when asked to utilise the different systems to help choose the most nutritionally appropriate option among a selection of foods, the traffic light system usually demonstrates clear superiority.

This is especially so in low-income or less educated population groups, who must be considered a major focus of any front-of-pack nutrition labelling systems because of the link between socioeconomic status and lifestyle diseases.

**PUBLIC HEALTH IN THE HANDS OF INDUSTRY?**

The food industry in Australia is quick to highlight the rejection of the traffic light system by the Parliament of the European Union in favour their preferred DIG approach to labelling. This rejection came despite the traffic light system having the strong support of EU public health and consumer agencies.

The strength of the European food industry’s opposition to the traffic light system is illustrated by the volume of scientific reports produced by food industry bodies in Europe and the intensive lobbying of EU parliamentarians around the time of the vote.

Corporate Europe Observatory, a Norwegian NGO, estimated that the industry spent one billion Euros on lobbying on this issue. This figure was rejected by industry, but it did not back away from its right to contact parliamentarians and provide information in support of its position on this important public health issue.

It is unlikely that we will see the same level of industry financial investment in preventing traffic light labelling in Australia, but the commitment to an oppositional position is just as strong.

The AFGC has consistently attacked the merit of the traffic light system in public forums, websites, press releases, published reports and submissions to governments. It is now running a series of television advertisements about the merits of the DIG system and has engaged high profile food producers to support its cause.

An assessment of submissions to the Blewett Inquiry shows that eight out of ten food industry submissions directly opposed the traffic light system. Meanwhile, there was almost unanimous support for traffic lights from a wide range of public health, medical and consumer organisations, as well as state government agencies.

The fact that the National Review of Food Labelling only recommended the voluntary introduction of traffic lights – unless a product makes a health claim – has not dimmed industry opposition and it can be assumed that government lobbying has already been ramped up.

It would be useful if the identification of such a clearly contentious but important public health issue led to increased support for objective research and analysis in relation to agreed population outcomes.

Past experience has shown, however, that scientific objectivity is often less persuasive than other forces in decisions around public policy.

**Timothy Gill is a Principal Research Fellow at the University of Sydney.**

Opinion first published at The Conversation, 30 March 2011
http://theconversation.edu.au
Is a ‘fat tax’ the answer to Australia’s obesity crisis?

Does Australia need a tax on fat? How would it work? Gary Sacks shares his thoughts

Obesity is a growing problem in Australia, with two out of three adults classified as overweight or obese. This increases their risk of developing chronic health conditions such as cardiovascular disease and diabetes.

The key drivers of obesity are around the food supply, particularly the increasing supply of cheap, tasty, high-calorie foods. It’s clear that the obesity crisis needs to be urgently addressed – and increasing the price of unhealthy foods is one way to discourage consumers from favouring poor nutritional choices.

Denmark is taxing foods such as butter, cheese, milk, meat and oil – should Australia take a similar approach?

If we want a tax that’s going to be effective in reducing obesity in the longer term, we need a broader approach to taxing unhealthy foods rather than just measuring the fat content.

We need to consider the salt, sugar and fat content, along with an assessment of the benefits of nutrients such as fibre, and fruit and vegetable content.

Put all of this information together and you’ll get an assessment of the overall healthiness of the food. A tax should be applied on this basis, not just the saturated fat content.

Based on this assessment, what type of products would be subject to a junk food tax?

This would include some high-sugar breakfast cereals, as well as fatty meats, some biscuits and sauces, confectionery and, of course, soft drinks.

Where would the revenue from such a tax go?

Our modelling work shows a two-pronged approach would be most effective in changing consumers’ food choices.

So you tax the foods that are high in sugar, fat and salt, and you use the revenue that’s generated to subsidise fruit and vegetables and some other healthy foods.

This would create more of an incentive for people to not only stop eating the unhealthy food but also choose the healthier foods.

We’d prefer the revenue generated from a tax on unhealthy foods to be used to subsidise fruit and vegetables but at the very least, it should be used for other public health measures.
Aside from Denmark, has a fat tax been imposed anywhere else in the world?

Hungary has very recently introduced a tax on unhealthy foods and in the United States some states have extra sales taxes on soft drinks.

But these US soft drinks taxes are more a revenue-raising exercise than a health initiative. I haven’t seen any data on health outcomes from these taxes.

We need a broader approach to taxing unhealthy foods rather than just measuring the fat content.

What evidence is there to suggest a tax on junk food will work?

Research shows price is one of the most important factors that consumers take into account when deciding what to buy – taste is the other main consideration. So increasing the price would discourage consumption.

We also know that when the price of foods change, people respond – a clear example is when the price of bananas goes up, consumption of bananas goes down.

There is also a lot of evidence from other public health measures, such as tobacco and alcohol, which shows when you increase the price of goods through a tax, consumption clearly decreases.

What impact will a junk food tax have on rates of obesity?

One single measure alone is unlikely to solve the problem. To make a difference to obesity levels, you need a whole suite of interventions – changing the price of unhealthy foods through a tax is just one measure.

We also need to consider other interventions such as restricting the marketing of unhealthy foods, improving food labelling (with a simple traffic-light labelling system), and implementing public education campaigns, among other things.

Research shows price is one of the most important factors that consumers take into account when deciding what to buy.

Won’t consumers always buy junk food, even if it’s more costly and clearly unhealthy?

The focus of all of these measures is to make it easier for people to make healthy choices.

These interventions aren’t about saying to people, “you can’t eat this and you have to eat that”. They’re about creating incentives and making the environment just that little bit easier for people to make the healthier choices.

Our modelling clearly shows that putting a tax on unhealthy foods and subsidising fruit and vegetables would end up making the population a lot healthier in the long term.

Importantly, it would have higher benefits for people in lower socioeconomic groups who are disproportionately affected by obesity and many other health issues.

Dr Gary Sacks is Research Fellow, Deakin Population Health at Deakin University.

Opinion first published at The Conversation 5 October 2011, http://theconversation.edu.au
A tax on junk food should be implemented as a tool to reduce consumption and address the obesity epidemic, according to an article in the Medical Journal of Australia. Ms Molly Bond, PhD candidate at the Michael Kirby Centre for Public Health and Human Rights, School of Public Health and Preventive Medicine at Monash University, and co-authors discuss the possibility of introducing a junk food tax in a similar fashion to tobacco and alcohol taxes.

“In recent years, obesity has overtaken smoking as the leading cause of premature death and illness in Australia.”

Ms Bond said that the recent report on taxation – the Henry tax review – recommended that the federal government increase taxes already levied on tobacco and alcohol, because these are the best way to reduce social harms caused by the use and misuse of these substances. However, no similar scheme was recommended for junk food.

“In recent years, obesity has overtaken smoking as the leading cause of premature death and illness in Australia,” Ms Bond said.

More than 60 per cent of Australian adults and one in four children are overweight or obese.

Evidence suggests that the obesity epidemic in Australia and around the world is predominantly the result of over-consumption of food rather than a reduction in overall physical activity.

“Curbing this over-consumption, of junk food in particular, must be a central component of any obesity prevention strategy.

“Junk foods have the same pattern of misuse and the same social costs as tobacco and alcohol.”

“We hope that the efforts of the public health community are not consumed in responding to government-industry initiatives that are almost certain to have no effect on the obesity epidemic.”

The Medical Journal of Australia is a publication of the Australian Medical Association.

Food taxes not the cure for obesity

The only way to reverse the obesity trend is with a preventative health approach involving governments, industry and the community, asserts the Australian Food and Grocery Council.

Imposing a regressive tax on high fat, sugar and salt (HFFS) foods won’t change overweight and obesity levels in Australia, the Australian Food and Grocery Council (AFGC) said today. Responding to the Assessing Cost-Effectiveness in Prevention (ACE Prevention) report, AFGC highlighted that there was already a 10 per cent tax on processed foods – the Goods and Services Tax (GST) which came into effect in 2000.

AFGC Chief Executive Kate Carnell said the report’s recommendation for a 10 per cent tax on ‘unhealthy foods’ made no sense in addressing obesity and wider health problems in the community.

“Taxes on food are simply taxes. While there is no tax on fresh food, Australia has had a GST on processed foods for the past decade yet obesity levels have continued to climb,” Ms Carnell said.

“Having a tax on food is clearly not the answer to effectively tackle Australia’s obesity problem – food taxes are regressive as they penalise people who can least afford it.”

Ms Carnell said Australia will only reverse the obesity trend with a comprehensive preventative health approach involving governments, industry, the community and individuals taking more responsibility for their personal health and of their families.

The ACE Prevention report also called for mandatory limits on salt in bread, margarine and cereals. However Ms Carnell highlighted that industry was already voluntarily reducing salt in foods in partnership with Government through the Food and Health Dialogue. Under the Dialogue, Australia’s food industry has agreed to salt reduction targets for breads and cereals. Australian researchers recently found that more than 70 per cent of Australia’s ready-to-eat cereals were already below the salt target in this category. (*Source: Webster et al., American Journal of Clinical Nutrition January 2010; 91:413-20)

Food companies are also proactively working with Government to target other food product areas where salt can be reduced including in processed meats, soups, sauces and snack foods.

Media release, 8 September 2010
Australian Food and Grocery Council | www.afgc.org.au
FOOD MARKETING TO CHILDREN

Cancer Council NSW recommends that a nutrient classification system be used to determine which foods are healthy

FAST FOOD COMPANIES SERVE UP A TURKEY

Fast food companies are the latest to pay lip service to responsible marketing to children. In July, the Australian Association of National Advertisers released the Australian Quick Service Restaurant Initiative for Responsible Advertising and Marketing to Children. As with other industry codes before it, this initiative contains many loopholes and appears more an attempt to deflect concerns about junk food marketing, rather than tackle the problem head on.

Not least of this code’s limitations is its application only for fast food served as a meal; defined as a main meal and a beverage. Such a distinction appears particularly evasive and will allow the unfettered advertising of products which are unhealthy, but sold as individual items. The nutrition criteria used are also overly complicated and could not be easily interpreted by the general public; and yet the monitoring of this code relies on public complaints.

Cancer Council recommends that an independently-developed nutrient classification system, similar to the nutrient profiling system established by Food Standards Australia New Zealand, be used to determine which foods are healthy and which are unhealthy and therefore not allowed to be advertised to children.

Currently the loopholes in this self-regulatory initiative to protect children from unhealthy food marketing render the code useless.

FREDDO: FRIEND OR FOE?

Forget Harry Potter and Ice Age, a new star has been born in The Adventures of Freddo and the Time Machine. Cadbury have recently spent millions of dollars creating a new Internet cartoon series featuring Freddo the Frog and his gang. In this unprecedented marketing campaign, children are taken on an ‘adventure’ with Freddo, the first part of which is released as 10 episodes to discover The Secret of the Golden Keys over 10 days – a strategy that will have children logging on daily for the next instalment.

Internet marketing is renowned for its use of interactive games to lure children into the branded environment. This campaign is no different, with puzzles, games and activities embedded within the cartoon where children can be
involved in the cartoon’s development. This campaign also goes one step further, with ‘real world’ challenges that are completed by children offline, which are of course branded.

Cadbury is claiming the site is an example of responsible marketing to children, with no chocolate featured on the site – unless you count the life-size chocolate frog that is the hero of the series ...

While the site does have some redeeming features, such as the requirement to get parent’s permission via email before children can access the site (which incidentally could be easily circumvented by children), Cadbury’s commitment to the industry’s Responsible Children’s Marketing Initiative is questionable. The first core principle in Cadbury’s company action plan for this initiative declares they “will not advertise food and beverage products to primary school aged children 12 years old or younger unless those products represent healthy dietary choices”; a statement which Cadbury claims also applies to online games. The last time we checked, a product containing 30 per cent fat and almost 60 per cent sugar is not a healthy choice.

**CONFECTIONERY – THE NEW HEALTH FOOD**

In some good news from Big Food, Nestlé has improved the nutritional profile of some of its products so they comply with industry self-regulations for food marketing to children.

Allen’s lollies are one product that has received a makeover, and is now being manufactured with 25 per cent less sugar. However, according to Nestlé’s own nutrition standards for advertising to children, a 25 gram serve of lollies could still contain up to 42 per cent sugar and be deemed healthy enough to be advertised to children between four and eight years.

Importantly, research shows that advertising affects children at both the brand and the food category level. This means that children who see an advertisement for Allen’s lollies, will not only ask for that particular product but also for confectionery in general.

Masking confectionery as a healthy product will not protect children from unhealthy food marketing. Tougher statutory regulations are required to ensure that products such as confectionery are not marketed to children at all.

**A FRAMEWORK TO INFORM THE FOOD MARKETING DEBATE**

A new study conducted by Cancer Council NSW, in collaboration with researchers at Sydney University, proposes a framework for classifying food marketing research to children. Research on food marketing to children requires a better understanding of the research gaps in order to inform the development of cohesive arguments and policy.

This framework considers the different components of research on this topic, including:
- Exposure (content analyses of media types)
- Effects of exposure (opinions, attitudes and actions as a result of food marketing)
- Regulations (the type and level of regulation that applies to food marketing), and
- Breaches of regulations (instances where marketing regulations have been violated).

By using such a framework, we are better able to examine available research at multiple levels, and develop a clear view of how food is marketed to children, and how this in turn affects them.

Researchers also used previous Australian studies on food marketing to children to demonstrate how this framework can be used to identify priority research areas. Some examples of priority areas that were identified relate to food marketing through the sponsorship of children’s sports (exposure); consumer responses to marketing through different media (effects of exposure); and more detailed policy research, such as modelling of impacts and costs of policy options (regulation).


**EVIDENCE SIGNALS RIGHT OF WAY FOR TRAFFIC LIGHT FOOD LABELLING**

Public health and consumer organisations in Australia recognise the need for clearer labelling of food products to guide shoppers towards healthier foods. The latest research from the Food Standards Agency in the United Kingdom supports calls for the introduction of traffic light labelling on the front of food packages.

The Food Standards Agency has conducted extensive
consumer research on front-of-pack food labelling since 2004, and their most recent study used a combination of shopping bag audits, observational studies in supermarkets and shopper interviews to determine how different labelling formats influence shoppers’ purchases and how well these labels are understood.

The major findings of this research were that labels using the words ‘high’, ‘medium’ and ‘low’ as well as traffic light colours were the best understood by shoppers, while the coexistence of multiple labelling formats introduces confusion for shoppers.

These findings are supportive of earlier research on front-of-pack labelling in Australia by Cancer Council and other public health and consumer groups, reported in the Summer Edition of *Junk Food Injunction*. In this research we tested nearly 800 shoppers on their understanding of different labelling formats, and found that traffic light labelling was the easiest to understand and use.

While the debate about front-of-pack food labelling in Australia has been put on hold until next year, as government undertake a review of all food labelling in Australia has been put on hold until next year, as government undertake a review of all food labelling in Australia, continued research and advocacy on this issue are required to ensure that the best front-of-pack labelling system is introduced into the Australian grocery market for shoppers.

**WEIGHING UP FAST FOOD RESTAURANTS**

No matter how unhealthy fast food is in Australia, we can rest assured that the food industry in the United States can beat it. The Centre for Science in the Public Interest, a nutrition advocacy group in North America, exposes ‘extreme eating’ in their latest *Nutrition Action* newsletter.

Some of the kilojoule and fat-packed meals they describe include:

- A starter of four small burgers with fries, giving a total of almost 9,800 kJ, equivalent to most people’s daily energy requirement
- Deep fried macaroni and cheese balls, a serving of which contains 69 grams of saturated fat, about the equivalent of eating 150 grams of butter
- A dessert sundae made using a giant chocolate chip cookie, baked in a deep dish pizza pan, topped with ice cream, whipped cream and chocolate sauce, giving almost 12,000 kJ and 72 grams of saturated fat.

It is easy to laugh off this food phenomenon as a ridiculous stunt by restaurants to lure customers; however such meals promote the idea that overeating is acceptable. Such a food craze was seen in Australia when Hungry Jack’s released their energy-packed Quad Burger last year. While most people recognise that a burger containing four beef patties, four slices of cheese and two rashers of bacon is inherently unhealthy, point of sale nutrition information at fast food restaurants is needed to guide people towards better food choices. Cancer Council advocates for the inclusion of nutrition information, such as traffic light colours, to be displayed alongside fast food restaurant menus to allow consumers to ‘weigh up’ exactly what they are buying.

**REAL KIDS’ FOOD: HEALTHY RECIPES**

**Broad bean dip with rosemary crisps (Serves 8)**

**Ingredients:**
- 500 g frozen broad beans
- 2 garlic cloves, quartered
- ¼ cup lemon juice
- ¼ cup low fat sour cream
- 1 teaspoon ground coriander
- 2 tablespoons olive oil
- ½ cup slivered almonds

**Rosemary crisps**
- 2 Lebanese bread rounds
- 3 teaspoons olive oil
- 1 tablespoon finely chopped fresh rosemary leaves
- 1 ½ tablespoons finely grated parmesan cheese

**Method:**

1. To make the rosemary crisps: Preheat oven to 180°C. Line two baking trays with baking paper. Place bread rounds on trays. Brush with oil. Sprinkle with rosemary and cheese. Bake for 5 to 7 minutes or until crisp. Break into pieces.

2. Cook beans in a saucepan of boiling water for 2 minutes or until just tender (alternatively a microwave could be used). Refresh under cold water. Drain. Peel and discard skins.

3. Process beans, garlic, lemon juice, sour cream, coriander, oil and almonds until almost smooth. Season with pepper and serve with crisps and/or vegetable crudities.

**Tips:**

Add frozen peas to the dip for a brighter green colour. The sour cream could be replaced with low fat ricotta cheese.

**Source:** *Super Food Ideas*, November 2008, Page 84.

Cancer Council NSW | www.cancercouncil.com.au
WOULD BANNING FOOD ADVERTISING AIMED AT CHILDREN REDUCE THE GROWTH IN OBESITY?

Australia is one of the fattest nations in the world. According to the latest figures, 4 million Australians are obese, and another 5 million are considered overweight. Our child obesity rate is also among the highest in the world, and it is estimated that about a quarter of Australian children are overweight or obese. The longer term health consequences of obesity are significant, and include cardiovascular disease, cancer, diabetes, and hypertension, to name a few.

It has been estimated that Australia also has more junk food advertisements per hour of television than any other country in the world. In recent years there has been growing pressure to tackle the problem of childhood obesity and its perceived links to junk food advertising, particularly during children’s television programs. Most of the food and beverages advertised heavily to children are poor in nutrients and high in calories. Research indicates that children below the age of about eight are not able to tell the difference between truth and advertising and are exploited by advertising which features popular movie characters, cartoons, catchy songs, competitions, and toys.

The latest draft of the Children’s Television Standards, released in August 2008 by the Australian Communications and Media Authority, has proposed minimal changes to existing regulations put in place 18 years ago and has not imposed further restrictions on advertising during children’s television hours. The decision has prompted extensive criticism from health and community groups, which have been lobbying the government for more than two years to ban the promotion of junk food to children on television.

In response the regulator stated that it was not a health advisory body, and after commissioning an independent review to assess whether a ban on food and beverage advertising would have an effect on childhood obesity, had concluded there was insufficient consensus. ACMA claimed that its research “indicates a relationship between television viewing – as distinct from television advertising specifically – and obesity in children. However existing research does not clearly demonstrate a causal relationship between any of these factors and obesity and indeed only a modest association is apparent.” It was however noted that there is little doubt that junk food commercials are contributing to the obesity epidemic by encouraging pestering.

On one side of the junk food debate are parents, nutritionists, doctors and consumer groups. On the other side are food manufacturing, advertising and media companies who claim the link between junk food advertising and obesity does not have conclusive proof. Advertising opponents argue that the advertisers would not pour $200 million a year marketing towards children if it did not increase consumption, while the food industry asserts that parents are ultimately responsible for what their children eat, and should not be subject to greater government regulation and the rules of a ‘nanny state’. The controversial combination of food advertising and children – ultimately, is it the cause of unacceptable, obesity-inducing pestering or a simple matter of consumer choice?

Arguments for and against a ban on food advertising aimed at children

ANTI-FOOD ADVERTISING BAN ARGUMENTS

- There is no way you can stop children from being exposed to food advertising – if not during advertisements, then in programming content, in adult time slots, and in other media – pay TV, the internet and mobile phone content.
- Food advertising is a necessary revenue stream – without advertising revenues from food companies, television channels could not afford to make kids’ programming. Children themselves would lose out.
- Regulations are already in place; specifically, a voluntary code brought in by the Australian Communications and Media Authority’s Commercial Television Industry Code of Practice and Children’s Television Standards which require TV stations not to air advertisements that promote ‘inactive lifestyles’ and ‘unhealthy eating habits’ or ‘put undue pressure on children to ask their parents or other people to purchase an advertised product or service’.
- Most Australian parents believe that exercise, rather than banning junk food ads, is the best way to combat childhood obesity.

PRO-FOOD ADVERTISING BAN ARGUMENTS

- Children are easily swayed by advertisements to consume junk food. Eating junk food causes obesity and television advertising during children’s programs will just convince innocent children that junk food is good. Stopping these advertisements will help obesity and lower children’s intake of unhealthy foods.
- We ban cigarette commercials, so why not those for junk food?
- Research tells us that children under five years of age do not distinguish between advertisements and programs, especially when the content is cartoon-like. Children under seven do not understand the selling intent of advertisements as they cannot take the perspective of another, and know if someone is trying to sell them something. Older children, like adults, are still persuaded by the appeals in advertising.
- Advertising to young children is not only exploitative and harmful, but is basically an unfair practice.
- Australian television programs can contain up to 15 minutes of advertisements per hour, which adds up to 27,000 advertisements per year, not including program

In the Australian Communications and Media Authority’s, draft report on children’s television standards, it asserts that food advertising restrictions would not reduce childhood obesity, as the evidence is ‘quite modest’ and the ‘research is limited’.

A 2008 report by the Australian Institute of Health and Welfare found there has been no growth in childhood obesity over the last decade. In other research, Jenny O’Dea found that rather than childhood obesity being a problem in the general population, the only significant increase is occurring among children in low-income homes.

Obesity in children is linked to the lifestyles of their parents, with the evidence strongly indicating that unhealthy parents pass their bad dietary and exercise habits on to their children. The real problem is permissive parenting.

Advertising bans have not lowered child obesity in Sweden and Quebec because it is parents not governments who are ultimately responsible for what their children eat.

According to a 2008 CSIRO study, there has been no significant rise in obesity since the last study in 1995. It identified 6 per cent of children as obese, compared to 5 per cent who were overweight. That was backed up in 2009 by University of South Australia research showing that while levels of obesity in children rose sharply in the 1980s and the first half of the 1990s, they have since plateaued.

Advertisers are in fact tackling the childhood obesity problem. Under the Responsible Children’s Marketing Initiative, leading food companies have committed to not advertise to children under 12 unless their products represent healthy dietary choices, consistent with established scientific or Australian standards.

Shielding children from marketing will not enhance their ability to make informed decisions in a consumer culture. Research shows that by the age of eight children have become sceptical of advertisements and are selective with how they view marketing information. They are more likely to be influenced by peers and family.

Eliminating advertising makes it harder for companies to introduce new products, and reduces competition and consumer choice. Some may turn to price discounting which can have the effect of increasing total consumption. Research links lower prices per calorie with high body mass index. Therefore, curbs on food advertising could actually exacerbate poor diet.

Just because junk food is being advertised does not mean that parents are forced to buy it for their children or give their children the money to buy it. Parents have the final say, and so are ultimately responsible for what their children eat.

The occasional hamburger, pizza, fries or soft drink does no harm. Australia is still a free society, and that freedom should not be abandoned lightly. Junk food is one of a number of causes of obesity, and a balance must be struck. We run the risk of creating a nanny state, if we were to ban food advertising aimed at children.

The majority of this advertising is likely to be for foods high in sugar, salt, fat and soft drinks high in sugar.

Commonsense tells us that advertising influences children’s food preferences. What they see advertised, they pester parents to buy. Children like to eat what tastes good, so you will not find many seven-year-olds eating to prevent cancer, type 2 diabetes or heart disease.

Children below the age of about eight cannot tell the difference between truth and advertising. Popular movie characters, cartoons, catchy songs, competitions, and toys feature in food advertisements, while in-store promotions reinforce the marketing message. Parents often do not have the energy, time or willpower to resist this pester power.

It is proven that both watching television and junk food advertising leads to obesity. If a child is watching television in the first place, watching junk food advertisements will not help the world’s obesity problem.

Most of the food and beverages heavily advertised to children are poor in nutrients and high in calories, and not the kind of food that children should be eating to lay the foundation for health, both in childhood and adulthood.

Childhood obesity initiatives would be far less effective if they were not supported by reforms limiting the overwhelming concentration of television advertising encouraging unhealthy behaviour among children.

Australia has seen an enormous growth in the sophistication, diversity and saturation of junk food advertising pitched at children, coinciding with an unprecedented increase in childhood obesity.

Food and marketing interests claim there is no correlation between advertising and influence on consumption. Surely the industry would not spend $200 million a year on these advertisements if they did not increase consumption.

Mass junk food advertising has radically changed children’s diets, turning soft drink, chips, muesli bars, fast food and sugar-coated cereals from occasional treats into everyday food. This is especially so in lower socioeconomic areas where weight problems are worse.

Government social marketing to reduce obesity is no match for the combined might of the junk food, grocery and television industries and their multi-million dollar advertising campaigns that encourage the consumption of foods high in fat, sugar and salt.

The latest revision of the Children’s Television Standards proposes only minimal changes to existing regulations on junk food advertising, succumbing to the vested interests of the powerful food and media industries.

Without an advertising ban, child obesity can’t be effectively reduced. Surveys consistently reveal that Australian parents express over 80 per cent support for a ban, but they remain unaided by government regulation and are left alone to contend with their children’s pestering.

Source: Issues and Opinions, Volume 1, 2010, pp.59-60
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Government, parents or advertisers: who should decide what kids watch and eat?

We need a coordinated approach to combat this growing problem, says Emma Richardson

A recent complaint to the Advertising Standards Board by the Obesity Policy Coalition about a Smarties online colouring-in competition aimed at three- to ten-year-olds, and a bill introduced by Greens leader Bob Brown to ban junk food advertising to children, has fuelled debate about the ethics of advertising energy-dense and nutrient-poor foods and beverages to kids.

Bob Brown says he feels the food and beverage industry’s “self regulation has clearly failed”, so action must be taken by the government to shield children from junk food advertising.

The Protecting Children from Junk Food Advertising Bill 2011 would ban junk food advertisements at specified times, as well as ban companies from using the internet to promote junk food to children.

This raises the question of whether television advertising, or rather advertising in general to an audience of children, is responsible in some way for the rates of overweight and obesity we are currently seeing.

### The numbers

There’s no denying that childhood overweight and obesity is a serious issue in Australia.

The most recent Australian National Children’s Nutrition and Physical Activity Survey, showed that, across all age groups, 17 per cent of children were classified as overweight and 6 per cent were obese. That’s almost a quarter of all Australia children being classed as overweight or obese.

Television advertising’s contribution to the prevalence of childhood obesity is estimated at 10% to 28%.

Meanwhile, a multi-country comparison of the estimated effect of television advertising on childhood overweight and obesity showed Australian kids are likely exposed to 4.9 minutes of food advertising on television every day.

The study concluded that in Australia, television advertising’s contribution to the prevalence of childhood obesity is estimated at 10 per cent to 28 per cent.

### WHO knows

In response to the recent actions by Bob Brown and the Obesity Policy Coalition, The Punch and Mumbrella websites have posted articles with unfavourable views of the proposed restrictions. The authors of both articles advocate responsible parenting over advertising restrictions as the cure for the problem.

The vulnerability of children lies at the centre of this debate: television junk food advertisements and competitions presenting energy-dense and nutrient-poor foods in an overly favourable light, and often on a regular basis, are surely difficult for parents to compete with.

And placing the onus on parents to have sole responsibility for countering these potent junk food advertisements is unlikely to be the best strategy for change.

The World Health Organisation (WHO) says reducing marketing of foods and non-alcoholic beverages high in salt, fat and sugar to children is a cost-effective way to reduce non-communicable disease. It recognises such measures as a ‘best buy’ for healthy diet promotion.

The WHO analysed available evidence and found strong links between television advertising and children’s food knowledge, preferences, purchase requests and consumption patterns.

### Bigger effort

Interestingly, 20 countries have developed or are developing policies relating to marketing to children.

In the United Kingdom, new restrictions on advertising food and drink to children were announced in February 2007. One of these restrictions stated that there should be no advertising of foods high in fat, salt or sugar in children’s programmes.
Greens’ Bill to ban television advertising of high fat, sugar and salt (HFSS) foods is over-the-top and amounts to censorship, the Australian Food and Grocery Council (AFGC) said tonight.

Greens Leader Bob Brown has introduced the Protecting Children from Junk Food Advertising (Broadcasting and Telecommunications Amendments) Bill 2011 – calling for advertising bans between 6 am and 9 am and 4 pm until 9 pm on weekdays and prohibiting adverts from 6 am until noon and 4 pm to 9 pm on weekends.

AFGC Chief Executive Kate Carnell said adverts for HFSS products are already not running during TV programs aimed at children under 12.

“Bob Brown has revealed his true colours by supporting censorship on television,” Ms Carnell said.

In March this year, common sense prevailed over censorship after a similar Greens Bill on banning advertising was convincingly defeated in the Senate (28 votes to 6). The new Bill goes even further, defining a child as a person under 16 years old.

“Fifteen-year-olds can hold a job in Australia but under this legislation, they can’t be trusted to see a chocolate, ice cream or a hamburger from a Quick Service Restaurant (QSR) advert – this is the ‘Nanny State’ gone crazy.

“Clearly this Bill is not about advertising to children but advertising to families. Surely Australian families – and 15 year olds – can make a decision about what a healthy diet looks like for them without having food advertisements banned.”

Ms Carnell said when children watch TV alone without supervision it’s a different matter – during these programs, industry does have a responsibility to advertise healthy food and active lifestyles. “That’s why industry introduced the Responsible Children’s Marketing Initiative (RCMI) and has successfully reduced the amount of HFSS food adverts on children’s television.”

The latest independent research in Australia found only 2.4 per cent of adverts on children’s TV were for HFSS foods between March to May 2010. These adverts were primarily placed in error in bonus slots by agencies.

Bans on advertising HFSS foods to children in Sweden and in Quebec, Canada, have been unsuccessful in combating obesity. In fact, in Quebec after the ban was implemented, obesity tripled among boys and doubled for girls.

A recent Productivity Commission study also found the link between TV viewing and childhood obesity was “small in magnitude” and it was “difficult to discern a relationship between advertising and body weight.”

“Obesity is caused by consuming more kilojoules than are expended in exercise – not by watching food adverts during family TV time,” Ms Carnell said.

The UK’s evaluation of these restrictions on children’s exposure to advertising found children aged four to 15 years saw 32 per cent less overall food and drink advertising following the institution of advertising restrictions.

This suggests that while parental responsibility is paramount, government intervention is needed to reduce the incidence of overweight and obesity in children.

The position of WHO is echoed in a 2007 submission by the Dietitian’s Association of Australia to the Australian Communications and Media Authority review of the Children’s Television Standards. The Dietitians Association of Australia believe “changes to food and beverage television advertising regulation is part of the solution to the obesity crisis in children, as it will make it easier for parents to support their children to make healthier food choices”.

We need to acknowledge that junk food advertising in isolation is not solely responsible for the rates of childhood obesity we see in today’s society. But to combat this growing problem, we need a coordinated approach that includes healthy eating and physical activity and sensible, supportive regulation.

Emma Richardson is a lecturer in Nutrition and Dietetics at Queensland University of Technology.


Media release, 21 November 2011
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Children require special consideration in areas such as advertising, and the presentation of material that ‘may be harmful to them’, due to their developmental stages. Children under eight years old do not have the critical literacy skills to recognise the persuasive intention of advertising.

Unhealthy food and drink companies spend billions of dollars per year on advertising and marketing promotions because they work. Food marketing affects children’s food choices and purchasing requests.

The marketing of unhealthy food and drink to children takes many different forms. There are the obvious mass media strategies like television, radio, cinema and print advertising. But there are also less obvious strategies such as in-store and point of sale promotions, television product placements and sponsorship activities.

**DID YOU KNOW THAT ...?**

- Australian children watch 2-3 hours of television a day, with the majority on commercial TV stations
- Fast food restaurants and confectionery are the two most common categories of food ads shown during children’s viewing times
- Food advertising uses attention grabbing and persuasive promotional techniques such as endorsements by characters and celebrities, ‘premium offers’, visuals, jingles and claims which can misrepresent the true nutritional value of the food
- Children are a key target audience for food manufacturers, as there are proportionally more ads for unhealthy foods during TV shows that are most popular with children
- Current regulations generally apply to advertisements screened during TV shows rated C (for children) and P (for preschoolers). The peak viewing period for children under 14 years old is 5-9 pm when up to 500,000 children watch TV, and when unhealthy food and drink ads are also most frequent
- Advertising influences children’s food preferences which undermines parents’ efforts to provide their children with a healthy diet
- The balance of ads for healthy and unhealthy food groups is well out of proportion to healthy eating guidelines
- Nearly one in four Australian children is overweight or obese
- Overweight and obese children have a high risk (80 per cent) of becoming an overweight or obese adult. Social isolation, poor self-esteem and depression are linked to weight problems. Their chances of developing diabetes, some types of cancer and heart disease are significantly increased.

You can read more about junk advertising to children in Coalition on Food Advertising to Children’s (CFAC) briefing paper, *Children’s Health or Corporate Wealth: The case for banning television advertising to children.*

The Parents’ Jury would like to thank the CFAC for its assistance in the compilation of this material.
Junk food is one of the mainstays of food advertising to children, who form the key market for junk food advertisers. Timothy Gill discusses some of the more concerning marketing tactics are the ones that play on children's desire to be popular. This is something advertisers are supposed to avoid but they clearly still resort to this tactic.

They imply certain cereal bars will make you more popular, that it's much cooler to throw away fresh fruit and instead eat a processed product.

Children's and adolescents’ interest in sportspeople, musicians, cartoon characters and superheroes has been relied on by advertisers for a long time.

It continues to be the linchpin of most advertising directed at children.

Then there's the use of toys and giveaways such as those you receive upon purchase of McDonald’s 'Happy Meals'.

How pervasive is children’s pester power?

It’s always very difficult to separate the numerous factors that impact on parents’ purchasing behaviour.

We know that children pester their parents about buying junk food and that being exposed to junk food advertising makes them agitate for these products more often. We have very clear evidence about that.

But I don’t really think we need a huge amount of scientific evidence about the influence of pester power on parents – ask any parent and they’ll give you a pretty strong answer.

Or just observe a supermarket queue and see the struggles that occur between children and their parents.

Some studies have tried to separate out the various influences on the purchasing behaviour of adults. Of course, adults would like to believe that they don’t concede to their children’s wishes but it’s inevitable.

Restrictions on junk food advertising would have an immediate and profound effect on this pester power.

Are junk food advertising restrictions likely to reduce childhood obesity rates?

That’s a little more difficult to tease out. As most people are aware, and as the food industry repeats quite often, obesity has a very complex genesis.

Clearly, marketing is not the only issue in this area so banning junk food advertising alone would probably only have a small immediate effect but a larger, long-term indirect impact on obesity rates.

What we do know is that a ban on marketing on food advertisements to children would enable parents to take a much more proactive approach in controlling what their children eat, helping to ensure important changes in their overall diet.

Restrictions on junk food advertising would have an immediate and profound effect on this pester power.

It would also send a very strong signal that the government believes that this is a serious issue worthy of intervention on. That’s not a message that’s coming out at the moment.

It’s not a message that is going to the food industry; it’s not a message that is going to the community, and neither is it going to the other organisations within the community that need to come together to act on this issue. Thus there is no imperative for anyone to act on this issue.

What impact will it have on obesity is the wrong question because it’s only a part of the solution – it’s part of a broad program of actions, which any public health initiative needs to demonstrate.

Everyone should get a message from this and it would provide immediate relief for parents who are struggling with the issue of pester power.

What have we learnt about junk food advertising restrictions elsewhere in the world?

Many people question the effects of the advertising bans imposed in Sweden and Quebec. However, the real example to examine is what happened in the United Kingdom when advertising restrictions were put in place during children’s viewing times, which is at the core of the Obesity Policy Coalition’s (OPC) blueprint.

The OPC’s recommendations go much further in addressing marketing through other media.

What we’ve seen from the UK Ofcom regulations is firstly that it is possible to restrict junk food advertising during children's viewing times. That it’s possible to define...
healthy and unhealthy food.

We know it’s possible to set restrictions – to define hours in which these advertisements can and can’t be shown.

And the world doesn’t fall apart.

The advertising industry doesn’t go out of business. In fact, in the UK, it didn’t even lose money. And the food industry didn’t lose huge market shares.

Advertising slots are still filled.

We have a society that is dominated by the car and promotes sitting and sedentary leisure time pursuits. There are a whole range of issues that we have to address as a society.

It’s not just up to government, it’s up to society to address these.

All this doesn’t relinquish the responsibility of the parents to take positive control of their children’s food and physical activity behaviours.

Parents need to act as models as well. It’s not much good telling kids “don’t eat this” or “go out and do some exercise” if they’re not doing it themselves.

They need to have the education and understanding of what’s there, what’s good and what’s not. Clear labelling of foods is also an important aspect of this issue.

Will banning the sale of chocolates in school fundraisers really make much of a difference?

The straight answer, if you’re looking at it from an isolated perspective, is no. It’s not going to have a huge impact.

But if you look at it from the perspective of creating a culture, creating an understanding of what needs to be done, then yes.

It is important because at the moment we send very mixed messages to children. It’s not much good telling them – and their parents – “don’t eat chocolates and confectionery” while at the same time sending home large boxes of chocolates for kids to sell.

Parents need to act as models as well. It’s not much good telling kids “don’t eat this” or “go out and do some exercise” if they’re not doing it themselves.

Kids eating these chocolates occasionally is not necessarily the problem, it’s the message they get and how it contributes to their understanding of an appropriate approach to sensible eating.

Timothy Gill is a Principal Research Fellow at the University of Sydney.

Endorsements by well-known sports personalities and selective nutrition claims on food packaging influence parents to buy unhealthy food for their children, according to Cancer Council Victoria’s new study.

The study, published in the journal Public Health Nutrition, asked parents to choose between an unhealthy food product and a comparable, healthier alternative, based on the packaging. Parents were given the option of reading the nutrition information panel (NIP) yet less than half (44 per cent) chose to do so.

Sports star endorsement and selective nutrient claims are powerful devices that can mislead parents about the healthiness of products.

When presented with two options, those who didn’t read the NIP were almost two and a half times as likely to choose the unhealthy product when endorsed by a sports celebrity, and almost twice as likely to do so if packaging featured a prominent nutrient claim, i.e. source of fibre.

Jane Martin, senior policy adviser for the Obesity Policy Coalition said the study strengthened the case for traffic light labelling, as recommended by the recent food labelling review, to help parents make informed and healthier food choices at a glance.

“There is strong evidence that marketing influences children’s food choices but historically there is little published data on the effect marketing to parents has on their perception and purchases. This study shows sports star endorsement and selective nutrient claims are powerful devices that can mislead parents about the healthiness of products.”

“When buying food for their children, parents are influenced by their perception of how healthy a product is. We’ve shown that this is affected by promotions highlighting positive elements of food and recommendations by athletes,” said lead author of the study, Dr Helen Dixon of Cancer Council Victoria’s Centre for Behavioural Research in Cancer.

Ms Martin said it was unrealistic to expect parents to always read and compare the NIP.

“If Australia is serious about combating our childhood obesity epidemic, there needs to be greater regulation of nutrient claims made by food manufacturers. The Obesity Policy Coalition strongly supports the food labelling review’s recommendation that companies should not be able to use such claims on unhealthy products.

“The study revealed that without clear nutrition information, parents are also significantly more likely to be swayed by sports star endorsement. We would like to see this powerful promotional technique used on unhealthy foods stopped.”

About the Obesity Policy Coalition
The Obesity Policy Coalition is a group of leading public health agencies who are concerned about the escalating levels of overweight and obesity, particularly in children.

The Obesity Policy Coalition partners include Diabetes Australia – Vic, Cancer Council Victoria, Victorian Health Promotion Foundation (VicHealth) and the World Health Organization Collaborating Centre for Obesity Prevention at Deakin University.

The Obesity Policy Coalition supports such policies as:
− Restrictions on junk food marketing
− Improved labelling on packaged food, including traffic light labelling
− Tax and pricing strategies to support healthy eating.
Industry self-regulation has failed to change the amount of fast food advertising targeting Australian children, according to new research from the Prevention Research Collaboration and NSW Cancer Council.

Researchers looked at fast food advertising during children's peak television viewing times and assessed whether companies were signed to the Quick Service Restaurant Industry Initiative (QSRII) for Responsible Advertising and Marketing to Children introduced in 2009.

This initiative, which had seven signatory companies at the time of the study, specifies that only food and beverages that represent healthier choices are to be promoted to children. Researchers also compared the energy content of the advertised food to the daily energy needs of girls and boys aged four, eight and 12 years.

**Current regulations**

In Australia, food and drink advertising aimed at children is regulated through statutory guidelines and industry self-regulation.

The *Children's Television Standards* are statutory guidelines which cover the use of promotions, popular characters, unsuitable material and clarity of messaging. These do not regulate the types of foods that may be advertised to children, except alcohol, and only apply to a limited broadcast period (around one hour a day).

Unfortunately, this is usually not during children's most popular programs or viewing times.

In terms of industry self-regulation, QSRII is one of two current programs. The other is the Australian Food and Grocery Council's (AFGC) Responsible Marketing to Children Initiative. These name specific types of foods and marketing techniques they consider appropriate for advertising to children and for defining child audiences.

However, these specifications are poorly defined, highly permissive and voluntary for food manufacturers and services. For example, company-developed nutrient criteria were found to consistently stipulate higher thresholds for negative nutrients compared with existing professional criteria.

Another example involves rules for television advertising AFGC's Responsible Marketing to Children Initiative. The threshold for applying advertising restrictions is rarely, if ever, reached since many of them stipulate that they only apply when children comprise half of the viewing audience. There has also been low participation in Australian industry self-regulatory initiatives by food companies.

**The failure of self-regulation**

The study authors found there were as many advertisements for unhealthy fast foods in 2010 as there were before the initiative was introduced.

One reason for this is that the Quick Service Restaurants' self-regulation only applies to a very narrow range of advertised foods.

For example, the regulations don't cover packages sold by fast food outlets as 'family meals', despite the fact that they are designed to be consumed by children and parents.

The analysis showed a child's share of all but one of these family meal packages contained energy far in excess of children's requirements.

The results indicate that in its current form, industry self-regulation is not reducing children's exposure to unhealthy fast food advertising.

This is consistent with results of previous research, which showed the Australian Food and Grocery Council's (AFGC) Responsible Marketing to Children Initiative had not reduced children's exposure to advertising for a range of unhealthy foods on Sydney television.

That research found children still watched the same amount of television advertising for unhealthy foods as they did before self-regulation was introduced. Findings from both studies suggest a clear need for governments to set standards for limiting food advertising to children.

**Why reduce children's exposure to junk food marketing**

There is consistent scientific evidence showing food marketing influences what foods children want, ask their parents for, and ultimately eat and drink.

The vast majority of food marketing targeted to children is for unhealthy foods and food marketing to children is extensive, across the internet, magazines, outdoor locations, and in stores.

Despite marketing being widespread across different media, television remains a major source of children's exposure to junk food advertising.
Issues in Society | Volume 343

exposure to advertising. Australian and international studies indicate that a meaningful reduction in advertising of unhealthy foods and beverages is likely to be a cost-effective (and probably cost-saving) strategy for obesity and chronic disease prevention.

Necessities, not luxuries

The National Preventative Health Taskforce set up by the Australian Government has recommended children’s exposure to unhealthy food advertising should be reduced.

The government response was that it would monitor the impact of self-regulation before taking any further action. To be convincing, industry self-regulation needs to redress the numerous limitations in its current commitments, and comprehensively and genuinely implement reductions in food and beverage marketing to children across all media, at all times and for a broad set of energy-dense, nutrient-poor food products.

It is particularly important for any policy limiting unhealthy food advertising to use a standardised, independent nutrient profiling tool based on per 100 g/100 ml to determine the appropriateness of foods and beverages for marketing to children. The World Health Organization has recently called for global action to reduce the impact of marketing foods high in saturated fats, trans fatty acids, sugars and salt on children and recommends governments introduce policies to reduce children’s exposure to marketing of these products.

The limitations and failure of Australian industry self-regulation to date indicates it’s time for government to take action and set regulatory standards.

Lesley King is an Adjunct Senior Lecturer, Sydney School of Public Health at the University of Sydney.

This piece is based on an article published in the Medical Journal of Australia.

JUNK FOOD AD BAN MUST BE COMPULSORY, NOT VOLUNTARY

Greater government regulation is required, insists the Australian Medical Association

New research shows that self-regulation has failed dismally in reducing junk food advertising during children’s television viewing times. After nearly two years of self-regulation by the fast food industry, children’s exposure to junk food advertising is unchanged. AMA Vice President, Professor Geoffrey Dobb, said today that junk food advertising to kids must be banned through Government regulation because the industry has not been effective in regulating itself.

Research by the University of Sydney and the Cancer Council NSW, published in the Medical Journal of Australia, found that the frequency of fast food advertisements remained unchanged overall since self-regulation commenced in August 2009 under the Australian Quick Service Restaurant Industry Initiative for Responsible Advertising and Marketing to Children. KFC, McDonalds and Pizza Hut are among the signatories.

“Greater government regulation of fast food advertising is needed to cover the failure of industry self-regulation,” Prof Dobb said.

Childhood obesity is a major health problem in the community and glossy advertising, especially in peak children’s television viewing times, is a major contributor to unhealthy junk food choices.

An AMA web poll conducted in October last year showed that 88 per cent of people who visited the AMA’s website supported a ban on junk food advertising during children’s television time. Parents, public health experts, and doctors would like to see governments take more serious action on this issue.

The advertising of junk food and beverages is leading to over-consumption of products that are at the core of the obesity epidemic affecting Australian kids and teenagers. Advertising unhealthy food to children can undermine the healthy eating messages that children get at school and from their parents.

Children do not have the capacity to understand or resist the influence of advertising, so they will constantly ‘pester’ their parents for the food and beverage products they have seen advertised on television. Food companies continue to use this form of advertising because they know it works.

The AMA believes a more hard-hitting and regulated approach is necessary to reduce childhood obesity in Australia.

“This will require significant commitment and cooperation from governments, non-government organisations, the media, health professionals, and especially the food industry,” Prof Dobb said.

Media release, 27 June 2011

Australian Medical Association | www.ama.com.au
Fat lot of good campaign against junk food is doing

If public health activists want to influence what individuals choose to eat, they should give up the anti-corporate grandstanding and accept that people can make their own decisions, argues Chris Berg

The debate over obesity and public health is usually black and white. It’s obvious who the bad guys are: junk food peddlers.

But last year, Cadbury, Coca-Cola, Mars, Nestlé, PepsiCo and about a dozen other firms committed to cut advertising of unhealthy products to children. This week, a spokesman for the Responsible Children’s Marketing Initiative said that “television advertising to children of certain foods has virtually ceased during children’s programs”. The firms are also reducing sugar and salt in some products.

Sounds good? Well, the president of the Public Health Association of Australia described it as “incredibly feeble”. Not “a step in the right direction”, or “good, but they could do more”, but literally so feeble it defies credibility.

Call this the ‘Healthy Menu Choices’ conundrum.

For decades, corporations have been told they need to get ‘socially responsible’ and think about more than just profits. And few corporations are more harangued than those selling unhealthy food. They have been demonised by the expanding public health establishment, who are certain children’s minds are being warped and their bellies expanded by the sinister alliance of sugar and advertising.

Milton Friedman wrote in 1970 that the only social responsibility of business was to increase its profits – profits being how businesses figure out whether they’re providing value. Friedman wrote in vain. Corporate philanthropy has become a bigger and bigger part of the business world. For the food industry, this corporate social responsibility means placating public health activists.

So McDonald’s – the very embodiment of unhealthy eating – has introduced salads. It has struck a deal with the Heart Foundation. In New Zealand, it has a relationship with Weight Watchers. Through the responsible marketing initiative, the confectionery industry is trying to show it is as supportive of a healthy Australia as chocolate makers ever could be.

Yet for all these attempts at conciliation, food companies just get demonised more. Each effort is condemned. If everything they do is going to be dismissed as the cynical expansion of corporate power, why should they try?

There’s a big anti-business component to the push for a nanny state. Many public health activists believe the blame for obesity lies with corporations – not with the choices of the people who buy unhealthy food. In the activists’ view, marketing is making people eat things that they would rather avoid, if only they weren’t so entranced by all the flashing lights and catchy jingles.

Hence the attention public health activists pay to multinationals, and the lack of attention they pay to, say, local fish and chip shops, pizzerias or Indian restaurants. Or Gordon Ramsay’s new restaurant – sometimes rich people eat bad things, too.

Last year, McDonald’s started sponsoring a maths tutoring program, Maths Online, for Australian students. The program charged students $40 a month, but McDonald’s sponsorship means it is now free.

The McDonald’s logo is displayed at the bottom of the front page. It’s not like kids are multiplying cheeseburgers and dividing Happy Meals. But, of course, one prominent public health activist, nutritionist Rosemary Stanton, celebrated by asking: “Are we happy [to] sell our children to McDonald’s?”

The public health establishment likes to see itself as a bunch of impartial medical professionals, but it is a coalition of self-styled consumer advocates, ‘lifestyle advisers’ and politicised academics. They see our health as a standoff between corporate profits and the health profession.

But the reality is more mundane, and more frustrating: not everybody believes that every fatty steak is doing them damage.

Certainly, most Australians value their fitness, weight, and life expectancy. But that is not all they value. Unhealthy food sells not because of insidious corporate messaging, but because people like it. Reducing the capacity of corporations to advertise their products won’t stop people wanting fatty or salty food. Unless you believe our primal taste instincts were invented in a boardroom.

So when public health types reduce complex issues of obesity and unhealthy lifestyles to a diatribe about the power of big business, it’s an emotional argument – not an honest one.

Individuals – and in the case of children, their parents – are the ones who choose what they eat. If public health activists want to influence that, they’ll give up the anti-corporate grandstanding and start treating us as if we make our own decisions.

Chris Berg is a Research Fellow with the Institute of Public Affairs and Editor of the IPA Review.

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On New Year’s Day, as the Victorian and Northern Territory governments followed NSW, WA and the ACT by implementing laws preventing cigarettes from being put on display to the public, the Australian Medical Association (AMA) called for a $25 million TV and newspaper advertising campaign showing “damaged vital organs or people drinking liquefied body fat” to shock Australians into giving up junk food and sugary soft drinks.

The good doctors based their call upon a belief that the fear-based advertising campaigns used by the TAC (in Victoria) and Quit have been effective in changing behaviour around driving and smoking. The mistake that they are making is that there is much more to the change of behaviour in relation to driving and smoking than the shock advertisements that have formed part of these long social marketing campaigns.

The advertisements that the AMA are suggesting are based on similar advertisements launched by the New York Health Department in October, 2010, highlighting how much sugar is in a bottle of soft drink. A video that was released as part of the “Pouring on the Pounds” campaign aimed to “educate New Yorkers about the potentially serious health effects of consuming sugary drinks.”

One of the videos in the campaign showed a man drinking fat poured from a soft drink can with the tag saying, “drinking one can of soda a day, can make you 10 pounds fatter a year,” while another showed a man consuming 16 packets of sugar to demonstrate the amount of sugar in an average-sized soft drink.

And at the far end of the obesity shock spectrum, a viral execution called ‘Break the Habit’ developed as a community service by The Precinct Studio in October, 2010, featured a mother preparing to inject her son with heroin before the scene changed to show him eating a hamburger. The end tag read, “You wouldn’t inject your children with junk, so why are you feeding it to them?”

Research in marketing and consumer behaviour suggests that some forms of shock advertising can have the opposite effect of increasing attitudinal loyalty to the brand or the product category, particularly amongst regular users. One explanation is related to the need for the ego to protect itself against any attacks on previous decision-making, thus avoiding or combating feelings of guilt. Advocacy groups need to recognise that shock for its own sake does not change behaviour. An emotional creative execution is useful, because it helps the brain to form memory connections when our emotions are heightened, but we need to be careful not to activate the ‘reject’ or flight response.

In a paper published in April 2010 in the Journal of Marketing Research, Nidhi Agrawal and Adam Duhachek found ads that were designed to trigger guilt amongst the target market actually
triggered a defensive processing mechanism. This mechanism, they argued, was explained by the notion that people tend to think things will go much better for them than for the average person. In other words, we think our own personal greatness buffers us from all potential negative consequence, whether it’s driving, smoking, or eating junk food.

However, the bigger problem in relation to obesity, and the more difficult one to counter, has been the growing sophistication of all facets of marketing to create an environment where highly processed and energy dense food is easily available to those living in developed countries. Over the past 30 years, consumers have been encouraged to eat more through highly sophisticated marketing activities, which includes supply chain management allowing easy access to convenience and processed food, lower pricing, including better ‘value’ and longer perishability of processed foods, as well as integrated marketing campaigns that encourage consumers to purchase and consume foods that provide a high fat, high sugar, and high salt ‘hit’.

Similarly, consumers who are asked whether they ‘want fries with that’, to upsize, or choose a ‘Value Meal’ instead of a single burger because it works out to be ‘cheaper’, are being influenced by a social discourse that says we should always try to capitalise on our consumption options and get the best ‘value for money’.

**We have increased our energy intake over the past 30 years by more than 1,000 kilojoules a day.**

While we have increased our energy intake over the past 30 years by more than 1,000 kilojoules a day according to National Institute of Diabetes and Digestive and Kidney Diseases in the US, other research suggests that physical activity has not significantly declined over that period. In other words, we are eating nearly 25 per cent more ‘food’, but have not really changed our activity levels (either way).

Marketers need to recognise that their activities have an effect far beyond simply selling products. When consumers make choices in their local supermarket, it is the highly processed and packaged foods that have a powerful ‘push’ effect. For example, although a 625 gram block of cheese (promoted as the same price as 500 grams) is presented as ‘good value’, the consumer will buy (and consume) 125 grams more cheese than they had planned, simply because it is a better ‘deal’. This effect of consuming what we are given even has a name – consumption rebound effects – where consumers will increase their consumption based on the availability of the resource.

Shock advertising can work, but it has to be more than a couple of scary images, followed by an educational message. Advocacy groups have to have same level of sophistication and understanding of consumer behaviour as commercial businesses, otherwise they simply end up talking to themselves, rather than those they are trying to help. Marketing is more than advertising.

The most successful social marketing campaigns are those that help people to change their behaviour through policy interventions, change programs, and, most importantly, the normalisation of the ‘good’ behaviour.

**Paul Harrison is a senior lecturer in consumer behaviour and marketing at Deakin University in Melbourne.**

First published by ABC Online, 11 January 2011

*The Drum Opinion | www.abc.net.au/unleashed*
Fed up with junk food marketing that targets your kids? Want to speak out but not sure how? Tell us about it! The current regulatory environment of junk food marketing to children is complicated. **Junkbusters** makes it easier for concerned parents to complain about inappropriate junk food marketing. Voice your concerns on the Junkbusters website.

### WHAT IS ONLINE BEHAVIOURAL ADVERTISING?

Have you been browsing the web and wonder why particular ads pop up - it could be online behavioural advertising (OBA). OBA is the practice of recording sites you visit on the internet and categorising them according to interests. This information is then stored as a cookie on your computer and advertisers then send you ads according to those interests. For example if you have been visiting mobile phone sites, a cookie will be placed on your computer to identify you as someone interested in mobile phones and when you are on the internet you will receive advertisements about mobile phones. Advertisers are quick to explain this data is non-identifiable and does not include your personal information.

Besides OBA what other forms of internet advertising are there?  
- **Contextual advertising** is advertising based on the site you are visiting e.g. travel ads on a travel site.  
- **Customer profile advertising** is based on personal information you have provided.  
- **Geo-targeting** is advertising based on the geographic location of where you access the internet (your server).

### What can I do about it?

Read the privacy policies on websites that use OBA. Be familiar with the privacy settings on your computer. Some companies have signed up to the Australian Best Practice Guideline and have developed procedures to allow you to opt out of OBA. That service is limited to OBA and to that particular company.

**Complaints**

- If it is about the content of the advertisement contact the **Advertising Standards Board**  
- If it is about the use of your personal information contact the **Australian Direct Marketing Association**  
- You could also contact the site you were on at the time or the **Australian Digital Advertising Alliance**.

### Advertising to children

The Guidelines state:  
“Entities agree to comply with applicable law and self-regulatory codes in relation to marketing and advertising to children (for example the AANA Code for Marketing and Advertising to Children and the ADMA Direct Marketing Code of Practice). OBA categories uniquely designed to target children under 13 will not be created.”
compliance with the voluntary marketing regulations, and uncover the loopholes in these regulations. This will lead to an environment that helps protect our children from aggressive marketing tactics and ultimately will help the fight against childhood overweight and obesity.

**HOW CAN I GET INVOLVED IN JUNKBUSTERS?**

There are four ways you can make a difference as part of the Junkbusters project:

1. **Click here to tell us about any food marketing aimed at children that you have seen and are concerned about**
2. **Use the Regulations Page to lodge a complaint about an advertisement or other marketing strategy aimed at children**
3. **Sign up to become a Junkbuster and help us to identify examples of food marketing aimed at children and spread the word about the project.** If you are interested, simply email your name and contact number to junkbusters@nswcc.org.au with ‘Junkbusters’ in the subject line and we will send you more information.
4. **Share this website with your contacts.**

**WHAT WILL HAPPEN ONCE I TELL YOU MY CONCERN?**

Tell us about specific examples of marketing of junk food to children, and we will advise you if there are grounds for a complaint and help you make your complaint to the appropriate body.

If your example of junk food marketing is not covered by the regulations, we will keep a record of it, to help illustrate gaps in the system. This information helps to assess whether the self-regulation system is adequate to protect children from inappropriate marketing of junk food.

**WHY WOULD I COMPLAIN UNDER THE COMPETITION AND CONSUMER ACT?**

If you believe that any marketing is misleading or deceiving, such as providing false information about the nutritional content or health benefits of a food, you would complain to the Australian Competition and Consumer Commission under the Competition and Consumer Act (formerly the Trade Practices Act).

For example, a food advertisement that creates the impression that a product is nutritious or good for children by highlighting beneficial nutrients or ingredients in food (e.g. promoting food as being high in fibre, protein or fruit), but that fails to draw attention to negative nutrients in the product (e.g. high sugar or saturated fat content) might be considered to be misleading or deceptive.

**WHAT ADVERTISING DOES THE CHILDREN’S TELEVISION STANDARDS COVER?**

The Children’s Television Standards, administered by the Australian Communications and Media Authority, covers advertising on free-to-air stations during and immediately before and after children’s programming. Children’s programming is classified as P or C in television guides.

The Standards do not allow advertising during P classified programs and limit the time that advertisements can be shown during C classified programs to no more than 5 minutes in each 30 minute period, except in the case of Australian children’s drama programs.

The Standards also state that advertisements in P and C programs cannot:

- **Mislead or deceive children** (e.g. trick a child into believing something that’s not true)
- **Create pressure to buy the product** (e.g. leading a child to believe they will be more popular if they have the product, or promoting ‘pester power’ by children)
- **Use characters or personalities to promote the product.**

Advertisements must also only advertise ‘premiums’ (e.g. free toys with purchase or product giveaways) in a way that is incidental to the product, so that children don’t believe it’s the premium itself being advertised.

Complaints under this regulation should go to the Australian Communications and Media Authority.

**I SAW AN ADVERTISEMENT ON FREE-TO-AIR TELEVISION THAT I’M NOT HAPPY WITH. WHERE WOULD I COMPLAIN?**

If the advertisement was shown during a P or C program it is covered by the Children’s Television Standards (see more detail in the FAQ about this standard).

Advertisements on free-to-air television that are shown during programming other than P and C classified programs are covered by the Commercial Television Industry Code of Practice. You can complain under this code if the
advertisement encourages or promotes an inactive lifestyle or unhealthy eating or it contains misleading information about the nutritional content of the food.

To complain under the Commercial Television Industry Code of Practice, you must first make a complaint in writing to the television station within 30 days of seeing the advertisement. If you are not satisfied with the station’s response or they have taken longer than 60 days to respond, you should then send your complaint to the Australian Communications and Media Authority.

There are several other self-regulated codes developed by the advertising and food industries which cover food advertising to children.

➤ The Australian Association of National Advertisers (AANA) Food and Beverage Code
➤ The AANA Code for Advertising and Marketing Communications to Children
➤ The Australian Quick Service Restaurant Industry Initiative for Responsible Advertising and Marketing to Children
➤ The Responsible Children’s Marketing Initiative of the Australian Food and Beverage Industry.

These voluntary codes apply to TV and many types of media and are discussed in more detail in the FAQ below and in the ‘regulations’ pages of the website. Complaints regarding these voluntary regulations should be directed to the Advertising Standards Bureau.

I SAW SOME MARKETING THAT WAS TARGETED TO CHILDREN AND NOT ON TV. WHERE SHOULD I COMPLAIN?

Food marketing on pay television, radio, print media (newspaper or magazines), cinemas, outdoor signs, websites and email are covered by several codes developed by the advertising and food industries. Complaints under these codes can be made to the Advertising Standards Bureau.

If your complaint is about advertising of unhealthy fast food directed at children (as defined by a set of nutrient criteria), or the use of premiums (e.g. free toy) or special offers (gift with purchase) or personalities or characters, you can complain under the Australian Quick Service Restaurant Industry Initiative for Responsible Advertising and Marketing to Children.

If your complaint is not about fast food but the advertisement is aimed at children under 12 and the company advertising has signed up to the Responsible Children’s Marketing Initiative of the Australian Food and Beverage Industry (see Regulations page on the Junkbusters website for links to find out if they have) then you can complain under this Initiative. Types of issues that may warrant complaints are if the food does not represent healthy choices, or if the marketing is dominated by the use of a premium (more than half the advertisement), or uses personalities or characters to endorse a product.

Finally, if your complaint relates to misleading or deceptive information on the nutritional content or health benefits of the food or if it creates peer pressure (e.g. child will have an advantage over other kids if they have the product) or parental pressure (e.g. encourages children to pester their parents for the food), then you can complain under the Australian Association of National Advertisers Food and Beverage Code or Code for Advertising and Marketing Communications to Children. You can refer to both these codes in your complaint.

WHAT ARE SOME OF THE LOOPHOLES IN THE WAY FOOD MARKETING IS CURRENTLY REGULATED?

Here are just a few examples:
- There are no codes covering marketing like brand marketing in sporting events (for example a sports drink sponsoring national sporting competitions, teams or stadiums), in-store promotions (such as supermarket displays of lollies) or packaging
- Fast food companies can market their ‘brand’ to children, as long as they’re not marketing products that don’t meet the nutrition guidelines. An example is of a fast food company marketing collectibles but not advertising their meals
- For an advertisement to ‘promote inactive lifestyles’ or ‘unhealthy eating’, it has to actually state to children that inactivity is a good lifestyle choice or encourage children to overconsume a product. To avoid this, advertisers simply use fit-looking or active children and state that the product can be enjoyed as part of a balanced diet
- Some codes rely on company-set nutrition criteria, meaning that companies can set their own criteria low so that their products can be marketed to children.

It is important to let us know of your concerns, so we can get a better idea of community concern about junk food marketing to children.

HOW HARD IS IT TO COMPLAIN ABOUT OBJECTIONABLE FOOD MARKETING AIMED AT CHILDREN?

Complaining about examples of objectionable food marketing aimed at children is not difficult. Many complaints can be completed online or via email, and the information about doing so is easy to find. The hard bit is working out to who you can voice your concerns.

That’s why we have taken all the guesswork out of lodging a complaint, and gathered all the information in one spot. Visit the Junkbusters website to tell us your concern or to see more information about the regulations.

WILL THERE BE ANY CONSEQUENCES IF I DO COMPLAIN?

Although the complaint process asks you for contact details for clarification of complaints and reporting of the outcome, your identity will not be revealed to the advertiser or the public and there are no consequences for the complainant once the complaint is lodged.

However if you are worried, you should read the
HOW LONG WILL IT TAKE FOR MY COMPLAINT TO BE DECIDED?
Complaints to the Advertising Standards Bureau are usually decided within six weeks.
Complaints to the Australian Communications and Media Authority (ACMA) or the Australian Competition and Consumer Commission (ACCC) may take several months to be resolved, as a formal investigation may need to be undertaken if the agency suspects a breach has occurred. The agency will usually let you know within one or two months whether they have decided to investigate your complaint.

WHAT HAPPENS IF MY COMPLAINT IS UPHELD?
If your complaint is upheld by the Advertising Standards Bureau (ASB), the company may be requested to withdraw or modify the advertisement (the ASB cannot force companies to comply with its requests, but in most cases they do so voluntarily).
If your complaint is upheld by the Australian Communications and Media Authority (ACMA) or the Australian Competition and Consumer Commission (ACCC), the company may be legally required to withdraw or amend the advertisement or other marketing strategy. The company may also be forced to take further action, such as paying a fine or advertising their breach publicly (corrective advertising).

HOW DO I CONTACT JUNKBUSTERS?
To request more information or to discuss how to get involved in the campaign, email junkbusters@nswcc.org.au or call Cancer Council NSW on (02) 9334 1467.
For more information on Cancer Council NSW visit www.cancercouncil.com.au
Have an example of food marketing to children? Visit the Junkbusters website to tell us about it.

Combating pester power
Most parents just learn to say no when children are pestering for the unhealthy food overwhelmingly displayed at supermarket checkouts. However, it’s hard to say no all the time. The Parents’ Jury has a number of tips for tackling pester power in the supermarket.

TIPS FOR TACKLING PESTER POWER
➤ Set clear boundaries with your kids. Talk about which foods they can eat at anytime, and which foods are okay only ‘sometimes’
➤ Talk to your kids about food openly and honestly, and take their questions seriously
➤ Look at nutrition labels on packaged and processed food with your children. Talk about the ingredients and what they should look out for. Generate awareness about where food comes from
➤ Don’t give in on the food boundaries you set. Persistent nagging is a powerful tool for kids to get what they want, hence the term ‘pester power’. If you give in to your child after they ask for something 10 times, then they know it takes 10 times to get what they want
➤ Experiment with new foods, and explore healthy new options. Let your kids take part in the grocery shopping and allow them pick out some of the food to take home. For example, let your kids pick which fruit and vegetables you buy
➤ Be a good role model. Buy and prepare the foods that you want your children to eat. Involve your kids in the cooking process by giving them simple tasks such as measuring, washing vegetables, setting timers, and stirring. At meal times, eat together as a family
➤ Talk about advertising with your kids. The Parents’ Jury supports the idea of educating children to learn about advertising, however the most vulnerable children are those under 8 years old who simply don’t have the cognitive ability to understand the intent of advertising. All the education in the world can’t override their biology.

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Junkbusters | www.junkbusters.com.au

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EXPLORING ISSUES

ABOUT THIS SECTION

‘Exploring issues’ features a range of ready-to-use worksheets relating to the articles and issues raised in this book.

The activities and exercises in these worksheets are suitable for use by students at middle secondary school level and beyond.

As the information in this book is gathered from a number of different sources, readers are prompted to consider the origin of the text and to critically evaluate the questions presented.

Does the source have a particular bias or agenda? Are you being presented with facts or opinions? Do you agree with the writer?

The types of ‘Exploring issues’ questions posed in each Issues in Society title differ according to their relevance to the topic at hand.

‘Exploring issues’ sections in each Issues in Society title may include any combination of the following worksheets: Brainstorm, Research activities, Written activities, Discussion activities, Quotes of note, Ethical dilemmas, Cartoon comments, Pros and cons, Case studies, Design activities, Statistics and spin, and Multiple choice.

CONTENTS

BRAINSTORM 50
WRITTEN ACTIVITIES 51
RESEARCH ACTIVITIES 52
DISCUSSION ACTIVITIES 53
PROS AND CONS 54
MULTIPLE CHOICE 55-56

WORKSHEETS AND ACTIVITIES
Brainstorm, individually or as a group, to find out what you know about fast food and nutrition choices.

1. What types of ‘extra’ foods should only be eaten occasionally?

2. What is meant by ‘junk food’? Give specific examples of food types.

3. Define the following terms and how they relate to the nutrition of fast foods.
   - **Saturated fats:**
   - **Salt:**
   - **Sugar:**
   - **Kilojoules:**
Complete the following activities on a separate sheet of paper if more space is required.

1. Most fast food is high in saturated fat, salt and kilojoules, and lacking in fibre, vitamins and minerals. What nutritional imbalances are associated with fast foods? Provide examples of 2 types of fast food restaurant chain products and evaluate their nutritional content.

2. List 5 specific healthy options for take-away foods, and explain why these choices are better for you than most other options from fast food chains.
1. After doing your own media monitoring research, provide two specific branded examples of each of the following strategies used by advertisers to promote unhealthy food and beverage products to children:

**Television advertisement (1):**

**Television advertisement (2):**

**Internet marketing (1):**

**Internet marketing (2):**

**Radio advertisement (1):**

**Radio advertisement (2):**

**Internet marketing (1):**

**Internet marketing (2):**

**In-store/point of sale promotion (1):**

**In-store/point of sale promotion (2):**

**Television/movie product placement (1):**

**Television/movie product placement (2):**

**Cartoon (1):**

**Cartoon (2):**

**Puzzle/game (1):**

**Puzzle/game (2):**
DISCUSSION ACTIVITIES

1. ‘Unhealthy food sells not because of insidious corporate messaging, but because people like it. Reducing the capacity of corporations to advertise their products won’t stop people wanting fatty or salty food.’ (Chris Berg, Institute of Public Affairs) Discuss.

2. ‘Australia needs a tax on junk food.’ Discuss.
On one side of the junk food marketing debate are parents, nutritionists, doctors and consumer groups. On the other side are food manufacturing, advertising and media companies who claim the link between junk food advertising and obesity does not have conclusive proof. Advertising opponents argue that the advertisers would not pour millions of dollars each year marketing towards children if it did not increase consumption, while the food industry asserts that parents are ultimately responsible for what their children eat, and should not be subject to greater government regulation and the rules of a ‘nanny state’.

Would banning food advertising aimed at children reduce the growth in childhood obesity?

Expand on the pros and cons provided below and develop your own debate on these issues. You must submit at least 3 additional points of view supporting and opposing the proposition raised in the question. Complete your arguments on a separate sheet of paper if more space is required.

**‘YES’ TO FOOD BANS**

✔ Children are easily swayed by advertisements to consume junk food. Stopping junk food ads will lower children’s intake of unhealthy foods...

✔ We ban cigarette commercials, so why not those for junk food? ...

✔ Children under 8 can’t tell the difference between truth and advertising. Parents don’t have the energy, time or willpower to resist their pester power ...

✔ Junk food advertising has radically changed children’s diets, turning soft drink, fast food and sugary cereals from occasional treats into everyday food ...

✔ Government social marketing to reduce obesity is no match for the combined might of the junk food, grocery and television industries and their multi-million dollar advertising campaigns ...

**‘NO’ TO FOOD BANS**

✖ There is no way you can stop children from being exposed to food advertising across the various types of media ...

✖ Regulations are already in place which restrict advertisers from targeting children with junk food marketing ...

✖ Most parents believe that exercise, rather than banning junk food ads, is the best way to combat childhood obesity ...

✖ Obesity in children is linked to the unhealthy lifestyles of their parents ...

✖ Advertisers are in fact already tackling Australia’s childhood obesity problem with their own self-regulating initiatives ...
Complete the following multiple choice questionnaire by circling or matching your preferred responses. The answers are at the end of the next page.

1. Which of the following foods are not considered to be 'junk food':
   a. Hamburger with chips
   b. Potato chips
   c. Lollies
   d. Sushi
   e. Hot dog
   f. Fried chicken
   g. Grilled fish burger
   h. Doughnut
   i. Fresh fruit

2. Respond to the following statements by circling either ‘true’ or ‘false’:
   a. Junk foods are usually low in nutrients and high in salt, sugar or fat.  
      true / false
   b. Australians spend over half of the weekly household budget on foods prepared outside the home.  
      true / false
   c. Fast food and take-aways are often high in saturated fats.  
      true / false
   d. Fast food outlets prefer to use unsaturated fat because it is cheap and can withstand high cooking temperatures.  
      true / false
   e. A maximum intake of no more than 10 g of salt per day is recommended for adults with normal blood pressure.  
      true / false
   f. Soft drink consumption has increased by 30% in Australia in 10 years.  
      true / false
   g. One in three Australians aged 18 years and over were obese in 2007-2008.  
      true / false
   h. 23% of Australian children aged between 2 and 16 years of age are obese or overweight.  
      true / false
   i. Most packaged foods and drinks in Australia are required to display the Nutritional Information Panel.  
      true / false
   j. Fast food restaurants and confectionery are the two most common categories of food advertisements shown during children’s viewing times.  
      true / false
   k. In Australia, food marketing to children during children’s television viewing times is currently self-regulated by the food industry.  
      true / false
   l. In December 2011, the Federal Government announced it would not support traffic light labelling on food. Instead, it proposed developing front-of-pack labelling with easy to understand nutritional information.  
      true / false
MULTIPLE CHOICE

Complete the following multiple choice questionnaire by circling or matching your preferred responses. The answers are at the end of this page.

3. Match the following terms to their correct definitions:
   a. Calorie
   b. Fast food
   c. Junk food
   d. Kilojoule
   e. Monounsaturated fats
   f. Obesity
   g. Overweight
   h. Pester power
   i. Polyunsaturated fats
   j. Salt
   k. Saturated fats
   l. Sugar
   m. Take-away
   n. Trans fats

1. A type of unsaturated fat that acts like saturated fat, causing blood cholesterol levels to rise. These fats occur naturally in small amounts in meat and some dairy products, but are mainly found in manufactured processed foods such as cakes, biscuits, pies, and some fatty take-aways.

2. Foods like soft drinks, cordials, biscuits, cakes and lollies have high levels of this substance, high intakes of which may contribute to the development of diabetes, overweight and obesity.

3. Defined as an excess of total body fat and is indicated by a BMI of ≥ 30 kg/m².

4. Convenience foods usually contain high amounts of this; too much of this in a diet is associated with an increased risk of high blood pressure, a known risk factor for heart disease and stroke.

5. Fats which are considered the best oils and, if used moderately, may lower levels of bad cholesterol.

6. Food purchased at a restaurant for the purpose of being eaten elsewhere.

7. Fats which are considered healthier than saturated fats but decrease levels of good cholesterol if consumed in excess.

8. Food that is low in nutritional value, often highly processed or ready-prepared, and eaten instead of or in addition to well-balanced meals.

9. A unit of measure of energy in food; one of these has the same energy value as 0.24 calories.

10. Defined as having a body weight greater than is desirable for good health and is indicated by a body mass index (BMI) between 25 to 29.9 kg/m².

11. A unit of measure of energy in food; one of these has the same energy value as 4.186 kilojoules.

12. Food that is often low in nutritional value, such as hamburgers, pizza, or fried chicken, that is prepared in quantity by a standardised method and can be dispensed quickly at inexpensive restaurants for eating there or elsewhere.

13. The ability children have to make their parents buy something or do something for them by continually asking until the parents agree to do it.

14. Often referred to as ‘bad fats’; linked with an increased risk of heart disease and total cholesterol levels in the body. Mainly found in animal products but can be found in some plant sources.

MULTIPLE CHOICE ANSWERS

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56 Fast Food Issues in Society | Volume 343
Australia has the fifth highest rate of adult obesity among OECD countries (25% of adults). (p.19)

Almost two-thirds of adult Australians are overweight or obese (62%). (pp.19, 22, 26, 28)

Australians spend around one-third of their weekly household food budget on foods prepared outside the home. (p.1)
One fast food or take-away meal may have more than 50% of your daily fat allowance and almost 100% of your daily saturated fat allowance. (p.1)
Saturated fats should make up less than 20 g of the fat in your daily diet. (p.1)
A maximum salt intake of no more than 5 g of salt per day is recommended for adults with normal blood pressure. Many Australians consume double this amount each day. (p.2)
In Australia, soft drinks have become among the most popular beverages. Their consumption has increased by 30% in 10 years. (p.2)
Current dietary recommendations advise that adults trying to lose weight should restrict their daily fat intake to 40 g or less. (p.2)
Most fast food is high in fat, saturated fat, salt and kilojoules with very little in the way of fibre. (p.3)
When McDonalds first began in 1955, a serve of fries weighed only 72 g. Today, it’s 205 g – almost 3 times as much. (p.3)
The recommended daily kilojoules for Australian women is roughly 8,400; for men, it’s 10,500. (p.3)
Since 1995, the rate of obesity has risen from 19% to 24%, with men gaining weight faster than women. (p.4)
A third of Australian adults living in areas of most disadvantage are obese (33%), almost double that of people in areas of least disadvantage (17%). (p.4)
The total daily intake for the average adult is 8,700 kJ, 70 g fat and 2,300 mg sodium. (p.6)
A ham and cheese sandwich is high in sodium and lacks nutrients. (p.9)
The average Australian family spends nearly 15% of their food budget on fast food and/or take-away food. (p.10)
Frequent consumption of foods that are high in energy, salt and saturated fat can put you at higher risk of heart disease, obesity and high blood pressure. (p.10)
All major fast food chains must display the kilojoule (calorie) counts of their food with the same prominence as the price. (p.13)
Doughnuts contain anywhere from 20-36% of your daily kilojoule intake depending on what sort you choose. (p.13)
In December 2011, the Federal Government announced it would not support traffic light labelling on food. Instead, it proposed developing front-of-pack labelling with easy to understand nutritional information. (p.17)
Over one quarter of the world’s population is overweight or obese (28.6%). (p.19)
Two-thirds of adult Australians are overweight or obese (62%). (pp.19, 22, 26, 28)
Australians have the fifth highest rate of adult obesity among all OECD countries (25% of adults). (p.19)
Approximately 1 in 4 children are overweight or obese. (pp.19, 22, 28, 34, 36)
Nutritional labels on food packaging empower consumers to make healthier and more informed food choices. (p.22)
Australian grocery buyers are overwhelmingly (87%) in favour of clearer nutrition labels on packaged food in the form of traffic light ratings. (p.23)
Putting a tax on unhealthy foods and subsidising fruit and vegetables would end up making the population a lot healthier in the long term. (p.27)
In recent years, obesity has overtaken smoking as the leading cause of premature death and illness in Australia. (p.28)
Internet marketing is renowned for its use of interactive games to lure children into the branded environment. (p.29)
Australia is one of the fattest nations in the world. According to the latest figures, 4 million Australians are obese, and another 5 million are considered overweight. (p.32)
The longer term health consequences of obesity are significant, and include cardiovascular disease, cancer, diabetes, and hypertension. (p.32)
Most of the food and beverages advertised heavily to children are poor in nutrients and high in calories. (p.32)
Children below the age of about 8 cannot tell the difference between truth and advertising. (pp.33, 36)
Mass junk food advertising has radically changed children’s diets, turning soft drink, chips, muesli bars, fast food and sugar-coated cereals into everyday food. (p.33)
Television advertising’s contribution to the prevalence of childhood obesity is estimated at 10-28%. (p.34)
20 countries have developed or are developing policies relating to marketing to children. (p.34)
Unhealthy food and drink companies spend billions of dollars per year on advertising and marketing promotions because they work. (p.36)
Fast food restaurants and confectionery are the two most common categories of food ads shown during children’s viewing times. (p.36)
From 2009-2010, the mean frequency of fast food advertisements increased from 1.1 to 1.5 per hour. (p.41)
A reduction in advertising of unhealthy foods and beverages is likely to be a cost-effective strategy for obesity and chronic disease prevention. (p.41)
The advertising of junk food and beverages is leading to over-consumption of products that are at the core of the obesity epidemic affecting Australian children. (p.41)
Some forms of shock advertising can have the opposite effect of increasing attitudinal loyalty to the brand or the product category, particularly amongst regular users. (p.43)
We are eating nearly 25% more food, but have not really changed our activity levels. (p.44)
Fast food companies can market their ‘brand’ to children, as long as they’re not marketing products that don’t meet the nutrition guidelines. (p.47)
**Balanced diet**
A balanced diet emphasises choosing a variety of foods from the following five food groups every day, balanced by physical activity: bread, cereals, rice, pasta, noodles; vegetables, legumes; fruit; milk, yogurt, cheese; and meat, fish, poultry, eggs, nuts, legumes.

**Calorie**
The amount of energy in food is measured in terms of kilojoules or kilocalories. Kilocalories are commonly known as calories and abbreviated as kcal. One calorie (kcal) has the same energy value as 4.186 kilojoules (kJ), while one kilojoule is equivalent to 0.24 calories.

**Diet**
Commonly used to mean any type of restricted eating pattern, however the word also means the food and drinks usually consumed, and so by definition, everyone follows a diet.

**Energy**
Energy is not a food or nutrient but is released from food components. The energy obtained from food is measured in kilojoules or calories.

**Fast food**
Food that is often low in nutritional value, such as hamburgers, pizza, or fried chicken, that is prepared in quantity by a standardised method and can be dispensed quickly at inexpensive restaurants for eating there or elsewhere.

**Fats**
Fats are the most energy-dense nutrient of foods and thereby contribute to being overweight. Animal fats are high in saturated fat and are the most dangerous to health. Monounsaturated fats (avocados; olive, peanut and canola oil) are considered the best oils and, if used moderately, may lower levels of bad cholesterol. Polyunsaturated fats (margarine, corn, sunflower, safflower and soybean oils) are considered healthier than saturated fats but decrease levels of good cholesterol if consumed in excess. Trans fat is a type of unsaturated fat that acts like saturated fat, causing your blood cholesterol levels to rise. Trans fats occur naturally in small amounts in meat and some dairy products, but are mainly found in manufactured processed foods such as cakes, biscuits, pies, and some fatty take-aways.

**Food labels**
Food labels are a source of very useful information. Labels provide both food safety information (e.g. use-by dates) and nutrient content information (e.g. nutrition information panels). Food labelling laws require all manufactured foods include a nutrition information panel.

**Food marketing to children**
Persuasive marketing techniques are frequently used to advertise non-core foods to children, as well as to promote children's brand recognition and preference for advertised products. Companies market food to children on television (including via cartoons and sports sponsorship), on the radio, on the internet, in magazines, through product placement in movies and video games, in schools, on product packages, as toys, on clothing and other merchandise, and almost anywhere where a logo or product image can be shown.

**Foods to have sometimes**
These are ‘extra foods’ (sometimes called junk food or treats) which should only be eaten occasionally. These include potato chips, chocolate, cakes, lollies, soft drinks and some take-away food like hamburgers and hotdogs. These foods are usually low in nutrients and high in salt, sugar or fat. They are ‘extras’ to be enjoyed occasionally. If these foods regularly replace more nutritious and healthy foods in your diet, you are likely to become overweight and may develop vitamin and mineral deficiencies and other health problems.

**Junk food**
Food that is low in nutritional value, often highly processed or ready-prepared, and eaten instead of or in addition to well-balanced meals.

**Kilojoule**
A kilojoule is a unit of measure of energy, in the same way that kilometres measure distance. Food energy can also be measured in terms of the nutritional or ‘large’ calorie (Cal) or kilocalorie (kcal). One calorie or kilocalorie has the same energy value as 4.186 kilojoules (kJ).

**Obesity**
Obesity is defined as an excess of total body fat and is indicated by a BMI of ≥ 30 kg/m².

**Overweight**
Overweight is defined as having a body weight greater than is desirable for good health and is indicated by a body mass index (BMI) between 25 to 29.9 kg/m².

**Pester power**
The ability children have to make their parents buy something or do something for them by continually asking until the parents agree to do it.

**Salt**
Convenience foods usually contain high amounts of salt. The body needs some salt. However, too much salt in the diet has been associated with an increased risk of high blood pressure, which is a known risk factor for heart disease and stroke.

**Sugar**
Foods like soft drinks, cordials, biscuits, cakes and lollies have high sugar content. Although sugar has not been directly linked to developing heart disease or diabetes, there is evidence that a high sugar intake may contribute to the development of overweight and obesity.

**Take-away**
Food purchased at a restaurant for the purpose of being eaten elsewhere. The restaurant may or may not provide table service. Food ordered this way (especially at fast food outlets) is ordered to go, as opposed to eating in or dining in. Take-away food is often fast food, but not always so.
Websites with further information on the topic

Advertising Standards Bureau  www.adstandards.com.au
Australian Better Health Initiative – Measure Up  www.measureup.gov.au
Australian Communications and Media Authority  www.acma.gov.au
Australian Food and Grocery Council  www.afgc.org.au
Australian Guide to Healthy Eating (Department of Health)  www.health.gov.au
Australian Medical Association  www.ama.com.au
CHOICE  www.choice.com.au
Coalition on Food Advertising to Children  www.cfac.net.au
Dietitians Association of Australia  www.daa.asn.au
Fast Choices  www.fastchoices.foodauthority.nsw.gov.au
Fat Free TV  www.fatfreetv.com.au
Foodwatch  www.foodwatch.com.au
Food Standards Australia and New Zealand  www.foodstandards.gov.au
Healthy Weight Week Australia  www.healthyweightweek.com.au
Junkbusters  www.junkbusters.com.au
National Health and Medical Research Council  www.eatforhealth.gov.au
Nutrition Australia  www.nutritionaustralia.org
Obesity Policy Coalition  www.opc.org.au
The Parents’ Jury  www.parentsjury.org.au

For more information about social issues visit The Spinney Press website at  www.spinneypress.com.au

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Index

A
advertising see also marketing complaints 45-48 overseas restrictions 37-38 shock 43-44 television 32-48 Advertising Standards Board 45 Advertising Standards Bureau 48 alcohol 2 Australian Association of National Advertisers (AANA) Food and Beverage Code 47 Australian Communications and Media Authority (ACMA) 48 Australian Competition and Consumer Commission (ACCC) 48 Australian Guide to Healthy Eating 2, 11 Australian Quick Service Restaurant Industry Initiative for Responsible Advertising and Marketing to Children 29, 40, 47

B
burgers 3, 6, 7, 8, 9, 13, 14, 15, 31

C
calories 20, 21 cartoons 29 cereals (incl. breads, rice, pasta) 11 chicken 5, 6, 7, 8, 9, 14, 15 Children's Television Standards 32, 33, 35, 40, 46 chips/fries 5, 13, 15 chocolates 38 Coke 3, 18 Commercial Television Industry Code of Practice 47 confectionery 30, 36, 38 Cadbury 29-30 Nestlé 30

D
dairy products 11 diabetes, type 2 19 Dietary Guidelines for Australian Adults 11 doughnuts 15

E
energy 10 exercise 9 ‘extra’ foods 1-2, 3, 11

F
fast food healthy options 3-4 ‘meal deals’ 3 problems with 3-4 restaurant chains 5-9, 13-15 Burger King 14 Delinis Choices 14 Dominos 5-6, 7, 14 Donut King 15 Hungry Jack’s 3, 6, 7, 9 KFC 6, 8, 9, 15 Krispy Kreme 15 McDonald’s 6, 7, 9, 14 Muffin Break 15 Oporto 5, 8, 15 Pizza Hut 6, 7, 8, 14 Red Rooster 5, 8, 15 Subway 5, 8, 15 fats 1, 7-8, 20, 21 saturated 1, 3, 7, 10, 20, 21 fibre 10 fish and chips 15 food additives 2 food labelling chain food restaurants 17 Dietary Intake Guide (DIG) labelling system 24, 25 front-of-pack system 18, 20 government policy review 16-17, 18, 21, 22, 24 Labelling Logic Report 16-17, 22, 23 Nutrition Information Panel 16, 18, 19-21, 22-23, 24-25, 39 food manufacturers 21, 23 foods prepared outside the home 1 fries/chips 5, 13, 15 fruit 11

G
grocery shopping tips 12

H
healthy cooking options 12, 31 eating options 2, 3-4, 10, 12 high fat, sugar and salt (HFSS) foods 35

J
‘junk’ food see fast food, take-away

K
kilojoules 1, 3, 9, 10, 13-15

M
marketing regulation, of food to children 29-48 advertising ban 32-36, 42 internet 29-30, 45 self-regulation for junk food advertising 40-41, 45-48 sports star endorsements 39 meat pie 15 meat, fish, poultry, nuts and legumes 11 muffin 15

N
‘nanny state’ 35

O
obesity 2, 4, 19, 26-28, 43-44 childhood 29-48 online behavioural advertising 45 overeating 3 overweight 2, 4, 19

P
parents 38, 39 pasta 7, 11 Percentage Daily Intake system 20, 21, 22 pester power 37-38, 48 pizza 6, 7, 14 meal portion sizes 3, 4 upsizing 4 Protecting Children from Junk Food Advertising (Broadcasting and Telecommunications Amendments) Bill 2011 34, 35

R
recommended serves 11 Responsible Children’s Marketing Initiative of the Australian Food and Beverage Industry 40, 42, 47

S
salads 14, 15 salt 2, 10, 20, 21 see also sodium sandwiches/subs 5, 8, 9, 15 sausage roll 15 snack suggestions 12 sodium 7-8 see also salt soft drinks 4, 27 steak sandwich 15 sugar 2, 7, 20, 21 sushi 9, 15

T
take-away 1, 2, 10, 15 healthy options 4, 10 tax, on fast food (‘fat tax’) 26-28

V
vegetables/legumes 11

W
wraps 7, 15