

Advertising of Unhealthy Foods in Bangladesh: The Current Situation and Suggestions for Action

Acknowledgements

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Summary

The growing epidemic of non-communicable diseases (NCDs) is causing increased concern throughout the world. In particular, illness and early death from NCDs is a growing problem in low-income countries. Bangladesh is experiencing growing rates of NCDs. The four main risk factors for NCDs are tobacco use, unhealthy diet, insufficient physical activity, and excessive alcohol use. Most of the population of Bangladesh has various risk factors for an NCD. While much has been done in Bangladesh on tobacco control, and while alcohol use is not a major issue, more needs to be done about the problems of unhealthy diet and insufficient physical activity. One cause of unhealthy diet is the promotion of unhealthy foods, accompanied by the lack of promotion for healthy foods. This report looks at the advertising of unhealthy foods via billboards, signboards, television, and newspapers, and provides suggestions on addressing the promotion of unhealthy foods, as well as on NCD control overall.

Comments from Experts

Dr. Mostafa Zaman

National Professional Officer (Non-Communicable Disease)

World Health Organization

According to WHO statistics, every year 36 million people die from non-communicable disease. This terrible epidemic is spreading throughout the world. Bangladesh is no exception. One of the main causes of NCDs is unhealthy diet. Consumption of unhealthy foods is in large part caused by extensive advertising, while healthy foods are not advertised at all. We need to reduce consumption of salt in our food, and avoid highly processed foods. In order to stay healthy, people need to eat fresh fruits and vegetables. The promotion of soft drinks, fast food, and junk food is common in Bangladesh and attracts young people. As a result, youth become addicted to these unhealthy foods and beverages. We need strict controls on advertising of unhealthy foods. Unless we limit consumption of soft drinks, fast

food, and junk food, we will not be able to increase consumption of fresh fruits and vegetables, which are needed for a healthy diet. I hope that the government will follow the recommendations in the WHO Global Strategy on Diet, Physical Activity, and Health. A Health Promotion Foundation could play a key role in ensuring effective implementation of the Global Strategy and other actions to safeguard public health.

Prof Dr. Subhagata Choudhury

Director, Laboratory Services

BIRDEM

Disease prevention is essential for health. Under the name of modernization, we have lost many of our positive traditional practices such as cooking whole, healthy foods. We lead busy lives, and have begun consuming fast food and soft drinks. The increase in the consumption of unhealthy foods is a direct result of increasing advertising for them. Advertising companies worry about profits and business, not about the health of the population.

If it becomes mandatory that schools and universities provide healthy foods at snack time, then the health of our children and youth would improve, and they would form healthy habits early in life.

We should be concerned not about overall food production, but at production of healthy foods, such as fruits and vegetables grown without chemicals and other untainted foods. In other countries, strong laws exist to maintain a safe and healthy food supply, and those laws are strictly applied. We need strong policies and political commitment here in Bangladesh to improve the quality of our food so that people can lead healthier lives.

In the mornings in parks and on the streets we see many elderly and middle-aged people, both men and women, out walking for exercise. But we see very few young people doing so. Young people need to understand the importance of exercise for health. It is one thing to live; our goal should be to live full, healthy lives. Youth have many more years of life ahead of them than do the elderly; they need good health, a good environment, and a positive social setting.

All cities need a pleasant environment for walking and attractive and safe public spaces for active recreation outdoors. We need controls on the use of private cars so that people can walk and cycle safely. All schools should have a playing field; if that is not possible, then three schools could share one playing field. We need strong preventive measures to ensure a healthy future generation.

Prof. Dr. Sohel Raza

Associate Professor, Department of Epidemiology and Research
National Heart Foundation Hospital and Research Institute

Unhealthy foods play an important role in non-communicable diseases (NCDs). Eating habits in Bangladesh have recently undergone dramatic changes. Unfortunately those changes are leading to an increase in the rate of NCDs. In both cities and the countryside, people are eating foods that contain more sugar, salt, and fat. The problem is particularly severe due to increased consumption of highly processed foods. While the problem is caused in part by people's lack of knowledge about a healthy diet, the bigger problem is the continual pushing through advertising, including the use of misleading information, to eat unhealthy foods. Control of advertising and of the use of misleading messages is essential to preserve public health. This report by WBB about the role of junk food advertising in promoting NCDs will play an important role in the development of such policies.

Prof. Dr. Pran Gopal Dutta

Ex- Vice Chancellor
Bangabandhu Sheikh Mujib Medical University (BSMMU)

A healthy economy requires a healthy population. Unfortunately, just as the rates of communicable diseases are declining, non-communicable disease (NCD) is becoming increasingly common. This is not a natural phenomenon. Companies make money by producing and selling unhealthy foods and other products. While those companies profit, the true cost of their products is paid by consumers and by government when people fall ill and require medical treatment, or are unable to work due to disability and early death. It is time to rein in the corporations which push unhealthy foods.

It is time to use the recently-established surcharge on tobacco products to create a health promotion foundation that will promote policies and projects to improve people's health. This includes bans on advertising of unhealthy products such as junk food, fast food, and soft drinks. It is time that we consider the health of our population and our environment as the most important goals for our nation, and that our policies reflect that priority. We can reduce NCDs and contribute to the health of our current and future generations. This report will help show us the way.

Background/Rationale

The world is facing a growing epidemic of non-communicable diseases (NCDs) which cause ill health, early death, and economic loss. Low-income countries now face a “double burden” of high rates of both communicable and non-communicable disease. The UN conference on sustainable development in 2012, Rio+20, referred to NCDs as “one of the major challenges for sustainable development in the 21st century.” A worldwide consensus is growing on the need to reduce the prevalence of NCDs.

“We acknowledge that the global burden and threat of non-communicable diseases constitutes one of the major challenges for sustainable development in the twenty-first century. We commit to strengthen health systems towards the provision of equitable, universal coverage and promote affordable access to prevention, treatment, care and support related to noncommunicable diseases, especially cancer, cardiovascular diseases, chronic respiratory diseases and diabetes. We also commit to establish or strengthen multisectoral national policies for the prevention and control of non-communicable diseases. We recognize that reducing, inter alia, air, water and chemical pollution leads to positive effects on health.”

--Article 141 of the Rio+20 document

What are NCDs?

Noncommunicable diseases (NCDs) refer to diseases that are not transmissible from person to person. The four main types of NCDs are:

- Cardiovascular diseases including heart attacks and stroke
- Cancers
- Chronic respiratory diseases including chronic obstructed pulmonary disease and asthma
- Diabetes

What are the major NCD risk factors?

The four main types of NCDs share the same major risk factors:

- Smoking and smokeless tobacco
- Unhealthy diet: diets high in sugar, salt, and fat, especially from heavily processed foods¹ including soft drinks; and insufficient consumption of fruits, vegetables, and whole grains

¹ Virtually all foods undergo at least minimal processing, even if it is simply picking a banana from a tree and peeling it. Packaged, minimally-processed foods that contain only one or two ingredients (dal, rice, milk, ...) are part of a healthy diet. An important contributor to poor diets is heavily-processed foods that contain many ingredients, many of which are not easily recognizable (such as colourings, flavourings, and preservatives) and that are high in fats, salt, and/or sugar while containing few or no nutrients, such as chips and soft drinks/energy drinks/artificial juices. Fried chicken, hamburgers, French fries, or other “fast food” prepared at home typically contains far less fat and salt than does the restaurant version; a lime juice prepared at home will contain vastly less sugar than a commercial soft drink. Other terms for unhealthy foods are “junk food” and “low-nutrient, energy-dense” referring to foods high in calories but with virtually no vitamins or minerals.

- Physical inactivity: below the daily recommended minimum of thirty minutes a day of moderate-intensity physical activity (such as walking)
- Excessive alcohol use

More than 80% of coronary heart disease, up to 90% of type 2 diabetes, and 33% of cancers could be prevented by changes in lifestyle factors, particularly smoking cessation, diet, weight maintenance and physical activity.ⁱ

How big is the problem?

Internationally, NCDs (heart disease, cancer, and stroke) are the three leading causes of death. More than 36 million people die annually from NCDs (63% of global deaths).ⁱⁱ Four-fifths of deaths from NCDs are in low- and middle-income countries. If strong measures are not taken, the global prevalence of NCDs is projected to increase significantly over the next twenty years.ⁱⁱⁱ

People with NCDs may live for many years with a disability. As a result, the economic costs of NCDs are high. According to the United Nations Development Program (UNDP), “Economic loss in China due to stroke, heart disease and diabetes (not including cancer) was estimated to be USD\$18 billion in 2005. The total cost for China incurred by overweight and obesity among adults is projected to surpass 9 percent of GNP by 2025.”^{iv} The Political Declaration of the UN High Level Meeting of the General Assembly on the Prevention and Control of NCD states that NCDs undermine social and economic development throughout the world and threaten the achievements of internationally-agreed development goals.^v

Low- and middle-income countries already bear 86% of the burden of these premature deaths, resulting in cumulative economic losses of US\$7 trillion over the next 15 years and millions of people trapped in poverty.^{vi} Both smoking and obesity rates are also highest among the poorest segments of the population. The World Health Organization (WHO) has declared obesity a global epidemic which has surpassed hunger as the chief nutrition problem, even in some developing countries.^{vii} Unhealthy diets, as with the other major NCD risk factors, directly cause disease and thus require global action to reduce their prevalence and their effect on health worldwide.^{viii}

Both economic development and urbanization tend to be accompanied by increases in NCDs; however such an increase is not inevitable. While both increased incomes and urbanization tend to lead to more smoking, drinking, availability of fast foods, and motorized vehicles, policies can reduce their use and toll. Policies can address the lack of good infrastructure for purposive physical activity and active recreation in ever-growing cities. Cities can be designed to facilitate and encourage purposive physical activity: using walking or bicycling as a means of transport to needed destinations including school, work, and shopping. Public spaces can be preserved and improved so as to offer people of all age the opportunity for active outdoor recreation and socializing. Healthy diets can be promoted and enabled through food policies, and the consumption of unhealthy foods can be discouraged through taxation policies, warning labels, and advertising bans. Strong health policies and

promotion can mean that economic development and urbanization are accompanied by healthier lifestyles and nutrition, and consequently with reduced rates of NCDs.^{ix}

It is known that advertising influences behaviour and those ads for foods will increase the quantities of those foods that children consume.^{xxi} Those ads are pervasive. The U.S. Federal Trade Commission has found that major food companies spent a total of \$9.65 billion on food marketing in 2009. Of that amount, \$1.79 billion was spent on marketing directed towards youth.^{xii} A study of television advertising targeted to children in several countries across five continents found that children were exposed to high volumes of television advertising for unhealthy foods, featuring child-oriented persuasive techniques.^{xiii}

Policies that have proven to be the most effective in changing the information environment include advertising bans, especially to children, advertising standards that ensure that marketing of products is truthful and not misleading, and package labelling of products.^{xiv}

The Bangladesh Context

NCDs in Bangladesh

NCDs account for 61% of the total disease burden in Bangladesh. According to the government^{xv}, major barriers to effective activities for NCD prevention include:

- Inadequate and outdated laws and loopholes in existing laws
- Inadequate and outdated enforcement mechanisms
- Absence of coordinated strategy, policy, and action
- Lack of an environment that is conducive to a healthy lifestyle

Strategies put forth by the government to address NCDs include “building healthy public policies” and “creating supportive environments for health”.

Contributing factors to the Bangladeshi NCD epidemic

Bangladesh is in many ways a typical country in transition. Significant success in reducing communicable diseases has increased life expectancy. Meanwhile, changing lifestyles and increasing urbanization have contributed to the increase in NCDs. Tobacco use continues to be a factor in NCDs, although this risk factor is being addressed by various organizations and programs including the National Tobacco Control Cell (NTCC) and tobacco control taskforces at the district level. Alcohol use is not a major issue. But less attention has been paid in Bangladesh to the problems of unhealthy diet and insufficient physical activity. Even in the countryside, people may be less physically active than previously, and traditional diets are undermined by the advent of packaged foods and particularly of soft drinks. Increasing physical activity not just among a few individuals but among the population at large will require improved urban planning and transport policies. Improving diet at the population level will require a number of policies to address

both increased consumption of fresh fruits and vegetables and decreased consumption of unhealthy, particularly heavily processed, foods.

Examples of heavily processed foods include packaged chips, biscuits, ice-creams, candies, soft drinks, sweetened juices, ‘energy’ drinks, sweetened breakfast cereals, sweetened and flavoured dairy drinks; instant noodles, sliced white bread, and other products made with ingredients such as hydrogenated vegetable fat, sugar, yeast, whey, emulsifiers, and other additives.

As Table 1 shows, most Bangladeshis do not eat enough fruits and vegetables. Concerns about chemical additives to fresh fruits and vegetables may have contributed to insufficient consumption of those foods. Insufficient physical activity is also a problem, particularly among women.

Table 1. Percentage of Bangladeshi population with selected risk factors

Risk factor	Male	Female	Total
Tobacco use	70%	34.4%	51.0%
Daily smokers	53.3%	1.1%	25.4%
Inadequate intake of fruits/vegetables (less than 5 servings on an average day)	97.6%	94.1%	95.7%
Low physical activity	10.5%	41.3%	27%
Overweight	13.0%	21.6%	17.6%
% with one risk factor	99.6%	97.9%	98.7%
% with two risk factors	82.9%	72.6%	77.4%
% with three risk factors	24.7%	31.5%	28.3%

Source: *Bangladesh NCD Risk Factor Survey 2010*. Bangladesh Society of Medicine, World Health Organization, N.C.D. Directorate General of Health Services, Ministry of Health and Family Welfare.

Advertising of unhealthy foods in Bangladesh

Advertising of unhealthy foods in Bangladesh takes many forms. Television advertising includes direct advertising, sponsorship of programs, and incorporation of unhealthy foods into programs, such as on talk shows and in TV serials where participants/actors are seen consuming unhealthy foods. Radio programs are also regularly sponsored by food/beverage companies. Billboards, signboards, and posters advertising unhealthy foods, particularly signboards on small shops, are common throughout the country. Newspapers also advertise unhealthy foods.

Why advertising of unhealthy foods is a concern

People are greatly influenced by the advertising and other messages that they see. Extensive discussion of dangerous chemicals being applied to fruits and vegetables can frighten potential consumers away from eating these foods, despite their essential role in a healthy diet. Consumers may perceive heavily processed foods as being more hygienic and safe than fresh, unpackaged foods. Meanwhile, extensive advertising of heavily processed foods can make those foods appear as an attractive, fun, and healthy option. With little or no information about a healthy diet and about the risks associated with heavily processed foods, people will tend to make choices based on the advertising they see, and thus put themselves at higher risk of facing ill health as a direct result.

In order to understand the extent of the problem and the level of need for policy interventions, Work for a Better Bangladesh (WBB Trust) carried out a study on advertising of unhealthy foods in Dhaka. This paper presents the results of that research. An understanding of the promotion of unhealthy foods is necessary in order to understand the extent of the problem and the urgency of solutions to it.

Methodology

This study consists of two components: observation and survey/interviews. Observation was conducted from 24 through 30 March 2014. Observation was further sub-divided into observation of television channels, newspapers, and of outdoor advertisements (billboards, signboards, and posters). In April 2014, a survey was conducted among children, supplemented by a series of open-ended questions among parents.

Advertisements for unhealthy foods mostly consist of ads for sugar-sweetened beverages (soft drinks, artificial juice, energy drinks, and “nutritional” beverages such as Horlicks), fast food (hamburger, French fries, pizza, fried chicken), and packaged chips. These items were chosen as being the most common and among the most unhealthy foods available. Some foods of questionable nutritional value, such as sweetened/flavoured milk, were not included in this research.

TV observation

Observation was conducted of six TV channels over the period of one week (24-30 March 2014) for two hours a day: from 5-6 p.m. and again from 8-9 p.m. The channels observed consisted of:

- Two Bengali channels: Channel I and BTV
- Two Hindi channels: Star Plus and Sony Max
- One cartoon channel: Cartoon Network
- One news channel: Channel 24

The TV channels have been selected based on their popularity among adults and children. An observation checklist was developed in order to collect information

about the frequency, length, and content of advertising of unhealthy foods. Content questions include who are the target groups, what is the context, and what type of unhealthy food is being advertised. Ads include both direct ads and the incorporation of food or logos within the program.

Observation of outdoor ads

Observation of billboards, signboards, and posters, was conducted for one day in April 2014; the observation of outdoor ads was conducted on Satmasjid Road in Dhanmondi. Observation consisted of counting the number of billboards, signboards, and posters for healthy food and for unhealthy food and an analysis of the message in the ads.

Observation of newspapers

Sixteen daily newspapers were observed for a total of seven days (24-30 March 2014) utilizing an observation checklist in order to count the total number of advertisements, the number of food advertisements and the number of advertisements for unhealthy foods. The message of the unhealthy food advertisements was also analyzed.

Survey of children

One hundred school-going children aged 7-10 years were interviewed using a structured questionnaire. The questions were mostly about their awareness of advertisements for unhealthy foods and their awareness of healthy foods.

Interviews with parents

Sixteen parents were interviewed using a set of open-ended questions. The questions focused on the extent of children’s exposure to and influence by unhealthy food advertisements.

Table 2. Survey methods

Methods	Respondents	Tools	Time
TV observation	6 TV channels	Checklist form	7 days, 2 hours/day, 5- 6 pm and 8-9 pm
Outdoor advertisement (billboard, sign board) observation	Satmasjid road	Checklist form	1 day
Newspaper observation	16 national newspapers	Checklist form	7 days
Children Survey	Children	Questionnaire	100
Interviews	Parents	Set of questions	16

RESULTS

Observation study

Billboard and signboard ads

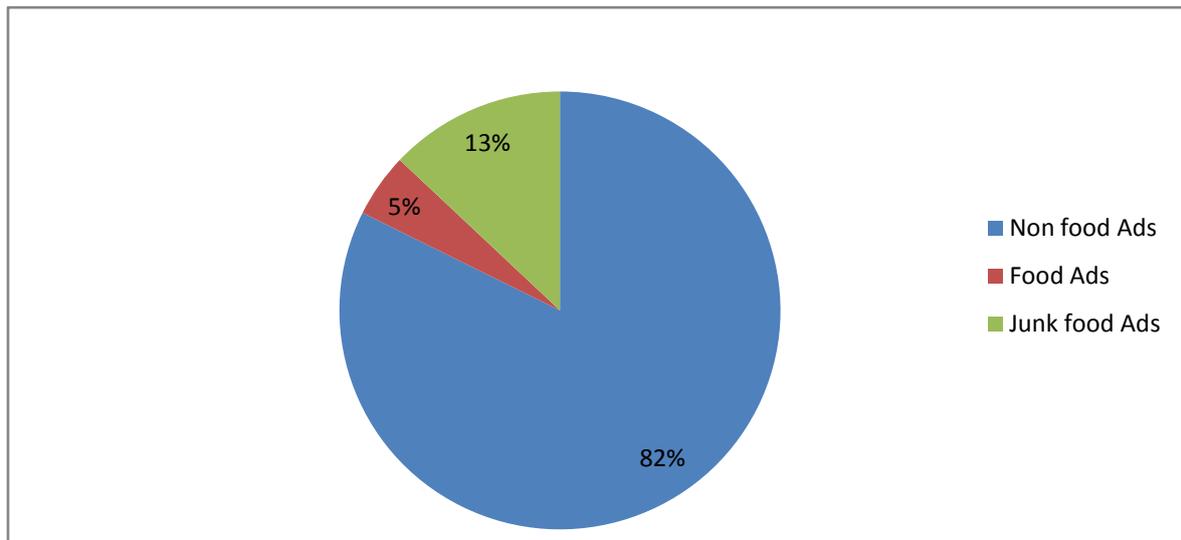


Figure 1. Billboards and signboards observed on Satmasjid Road

Both sides of Satmasjid Road were observed for the presence of billboards advertising unhealthy foods. Of all the billboards observed, 13% were ads for unhealthy foods, while 5% advertise other foods such as bread, milk, and biscuits. No ads for healthy foods such as whole grains or fresh fruits or vegetables were seen.

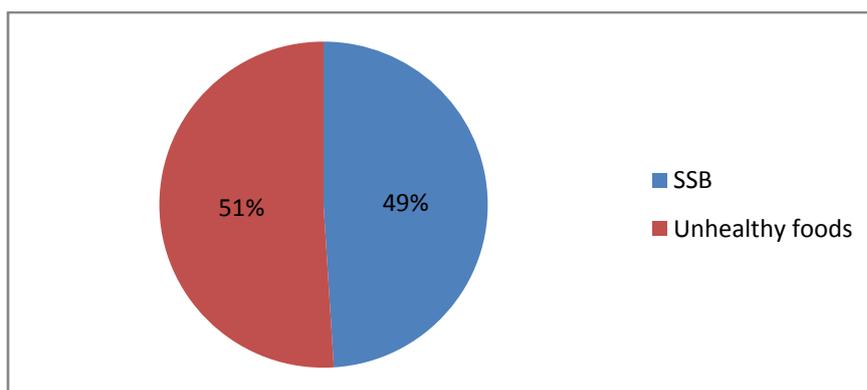


Figure 2. Percentage of ads on billboards and signboards that are unhealthy foods vs. soft drinks

Half of the unhealthy food ads on billboards and signboards were for fast food and half for sugar-sweetened beverages (soft drinks, artificial juices, energy drinks, and sweetened “nutritional” drinks).

Television Advertisements

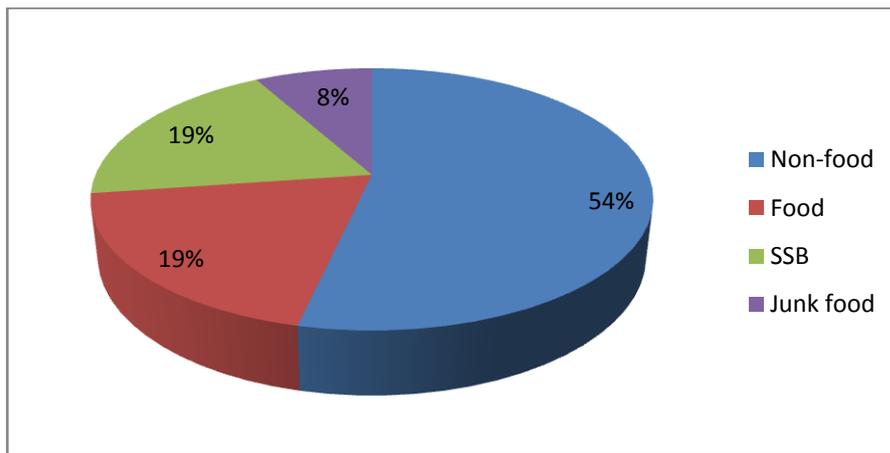


Figure 3. Types of advertisements on television

Overall, most (54%) of the television ads observed are for products other than food. There were as many ads for sugar-sweetened beverages (19%) as for other foods (19%). No ads for healthy foods such as whole grains or fresh fruits or vegetables were seen.

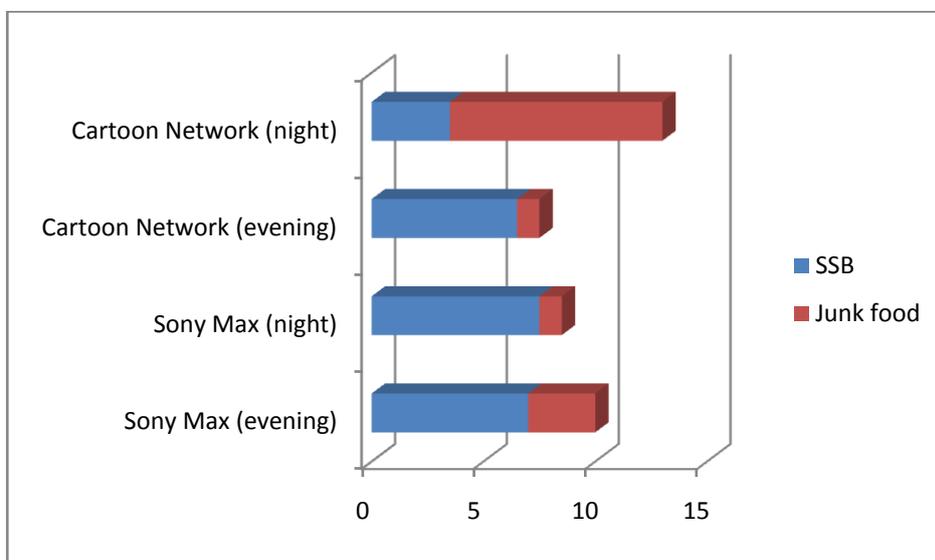


Figure 4. Types of unhealthy foods advertised on television

Most of the unhealthy food ads observed on television were for sugar-sweetened beverages such as soft drinks (Coca-Cola, Pepsi, Mojo), energy drinks, and artificial juice. There were also many ads for junk food.

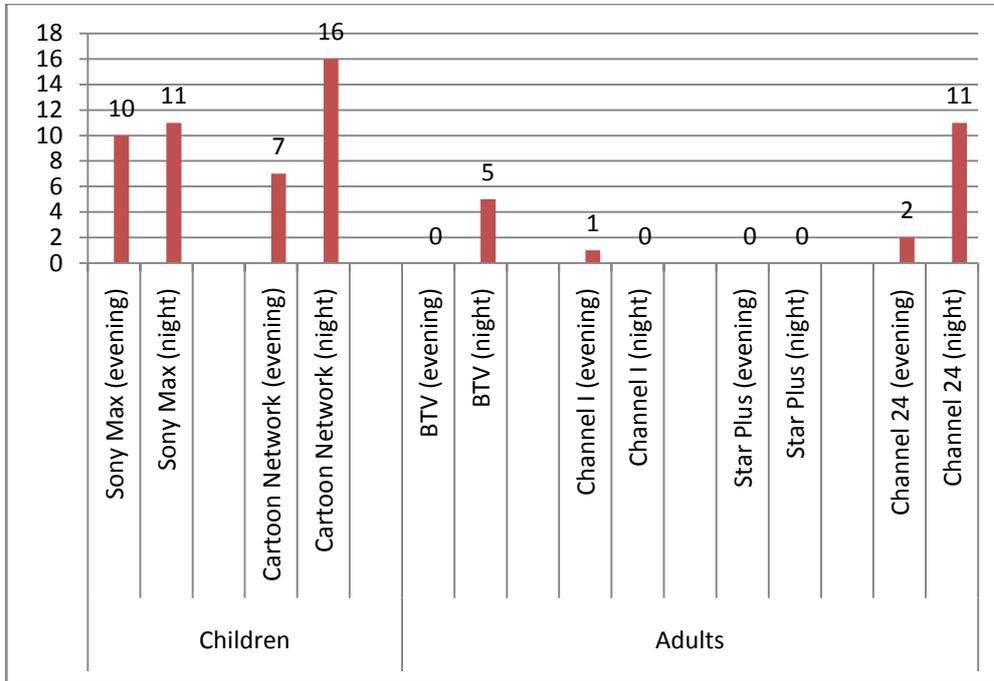


Figure 5. Number of unhealthy food ads on six selected TV channels, child vs. adult programs

Six television channels were observed for one hour in the evening (5-6 pm) and one hour at night (8-9 pm). Advertisements for unhealthy foods were more prevalent later in the evening. Channels that target children (Sony and Cartoon Network), show more unhealthy food ads than channels that target adults. Sugar-sweetened beverages are the most commonly unhealthy food advertised on TV, while ads for chocolate/candy are prevalent on the cartoon channel, particularly at night. There were also many ads for energy drinks and chips.

Newspaper ads

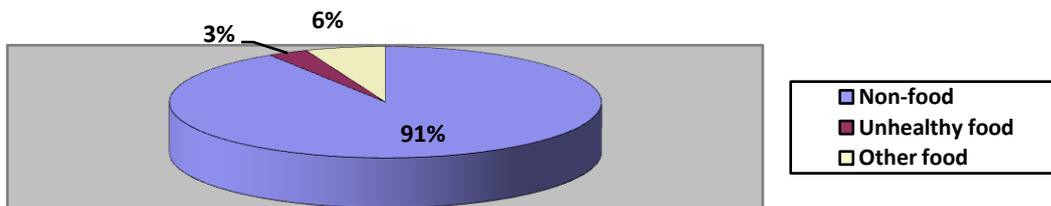


Figure 6. Types of ads in newspapers

Few ads for unhealthy foods were observed in newspapers, with 91% of newspaper ads being for something other than food. Of the ads in the newspaper for unhealthy foods, most were for sugar-sweetened beverages. "Other" food included biscuits and milk. No ads for healthy foods such as whole grains or fresh fruits or vegetables were seen.

Content analysis

The overall message of ads for unhealthy foods is that consuming such foods makes people happy, popular, and attractive. Just as advertising for cigarettes enforces ideas of health and good fun, so too with unhealthy foods. Beyond that general statement, some specifics were noticed:

- Ads for Horlicks (a sugary “nutritional” supplement) say that children will grow better. Ads also say that children who do not like milk will drink if it is mixed with Horlicks, and those children who do not like to eat vegetables will eat them if they are also given Horlicks.
- Ads for energy drinks say that people’s energy and motivation will increase, and they will be able to do difficult things. One ad shows people able to leap from a faraway place to Dhaka, claiming that people can thus do the trip for a mere 20 taka.
- CLemon (a soft drink) says that it will make people feel fresh. CLemon also carried out a joint program with the Government of Bangladesh during KurbaniEid encouraging people to dispose of their trash properly.
- CocaCola shows its product making people joyous and happy.
- One brand of juice shows a politician telling lies, who after drinking the juice tells the truth.
- CP (fried chicken) ads claim that the product is healthy, safe, cheap and delicious.
- An ad for Lifebuoy soap telling people to wash their hands before they eat shows people consuming hamburgers, as if junk food *were* food.

Survey/interviews

Interviews with children

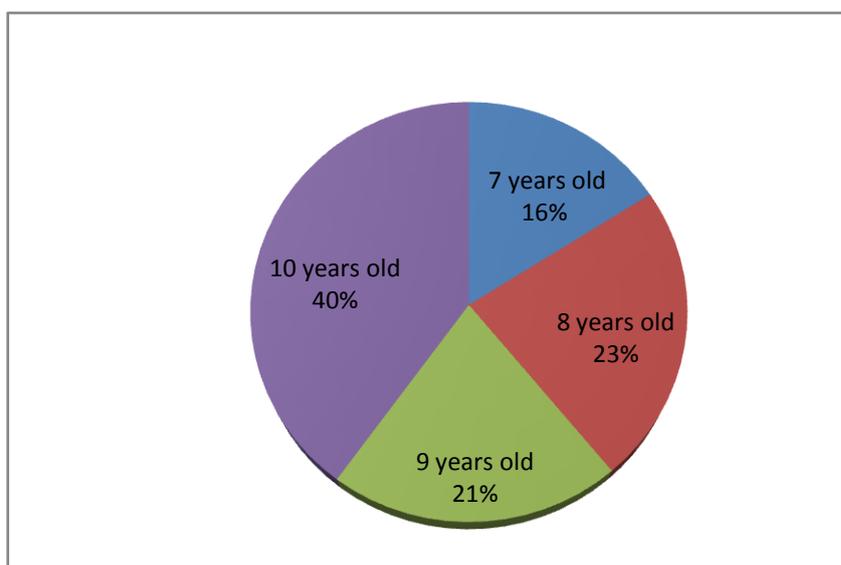


Figure 7. Age distribution of child respondents

The age of the 100 children interviewed ranged from seven to ten, with more ten-year-olds than any other age group. All of the respondents attend school. They were selected from different areas of Dhaka city.

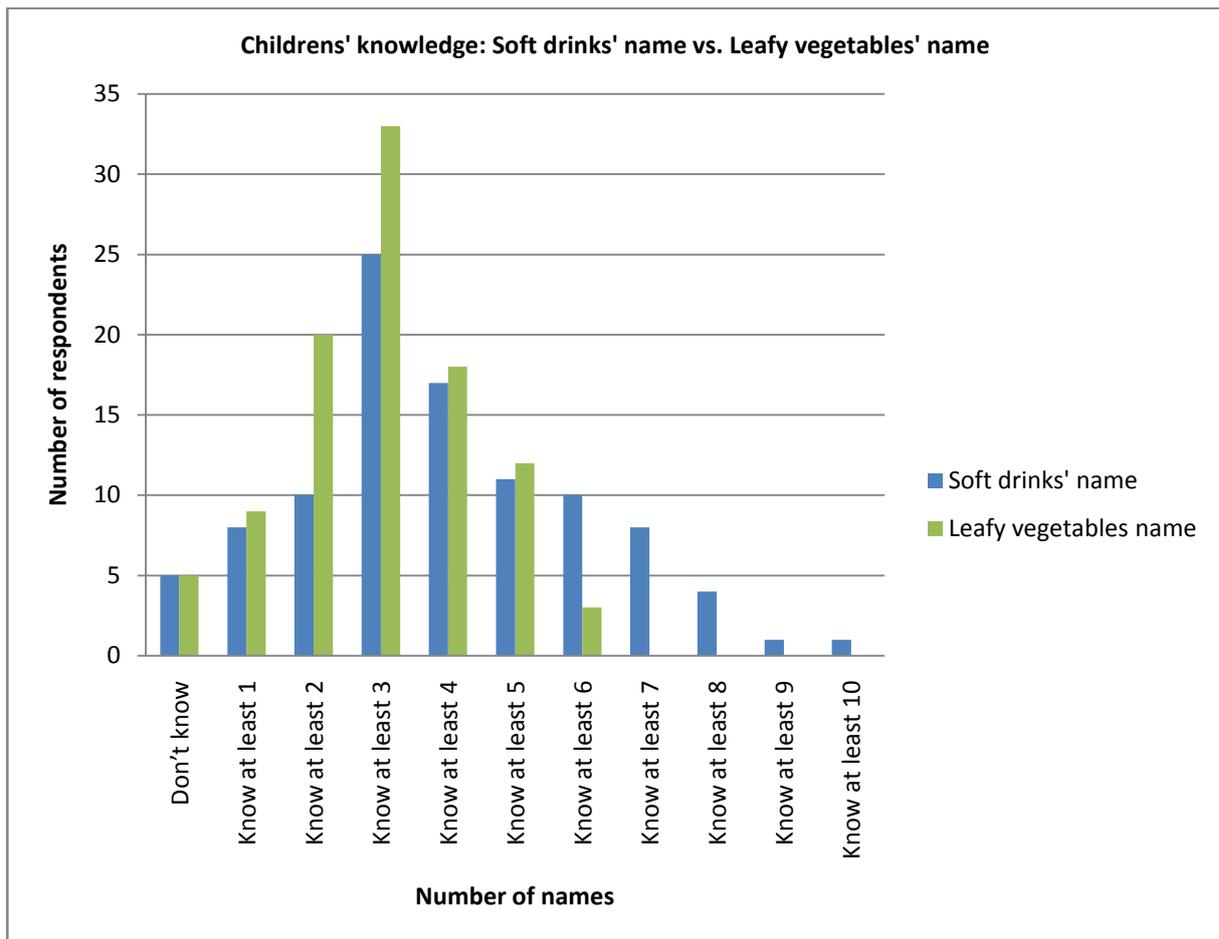


Figure 8. Children's knowledge of sugary drinks versus leafy vegetables

Most children could name at least a few brands of sugar-sweetened beverages (SSBs) e.g. soft drinks, energy drinks, and artificial juices as well as green leafy vegetables. The highest proportion of children know the names of at least three sugary drinks and three leafy vegetables. However, children could not name more than six types of leafy vegetables, while they could name as many as ten different types of sugary drinks.

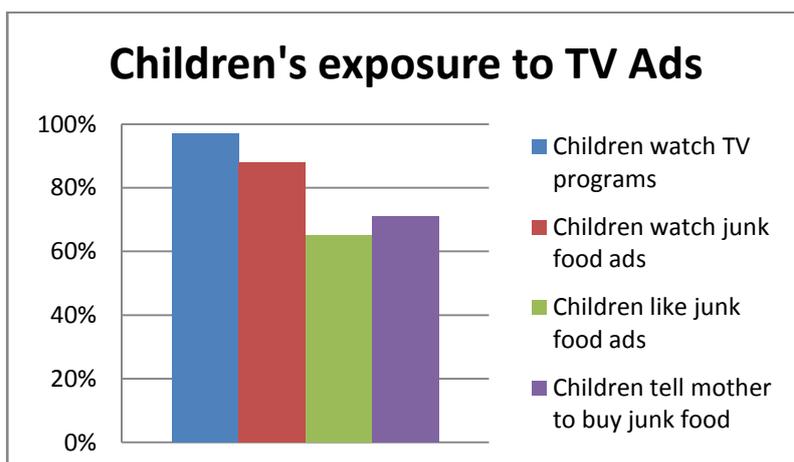


Figure 9. Children's response to unhealthy food ads on TV

Among the 100 child respondents, 97 children watch television programs and 88 children can recognize unhealthy food ads that they watch regularly. Nearly three-quarters (71 children) said that they push their mother to buy unhealthy foods. However, more children say they pressure their mother to buy unhealthy food than say they enjoy watching the ads.

Interviews with parents

“After watching TV ads, my three-year-old demands Horlicks. He says that if he drinks it, he’ll grow big.”

According to the interviews with sixteen parents, children mainly prefer three types of unhealthy food: chips, sugar-sweetened beverages, and fast food. The most common request from children is for chips, followed by sugary drinks; fewer children request fast food.

All sixteen of the parents said that their children push them to buy different types of unhealthy foods.

“My child sees other children eating these foods, and she sees ads on TV and demands them. We try to keep her from eating them but she demands them.”

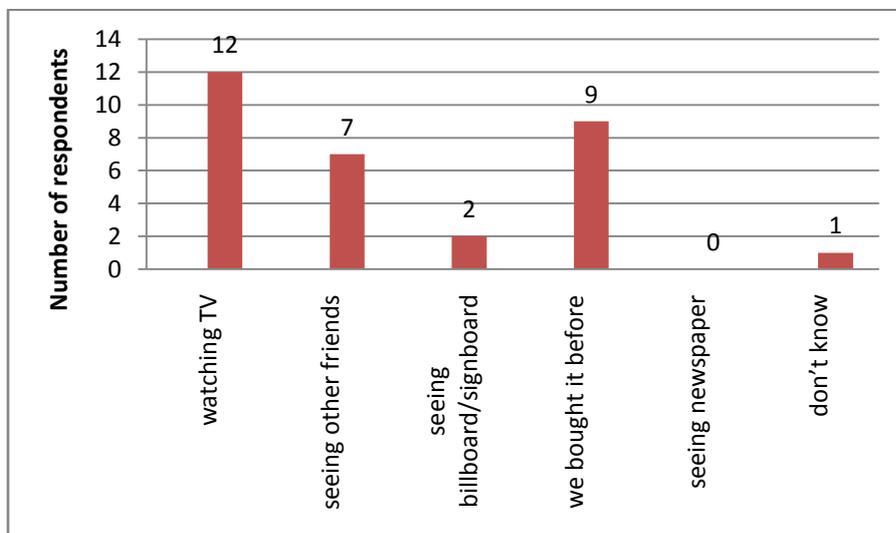


Figure 10. Parents’ response to question of how their children know about unhealthy foods

Among the sixteen parents, most think that their children know about unhealthy food by watching television. The second most common response was that the parents had bought those foods themselves for their children. None of the parents mentioned newspapers as a source of information/enticement for unhealthy foods.

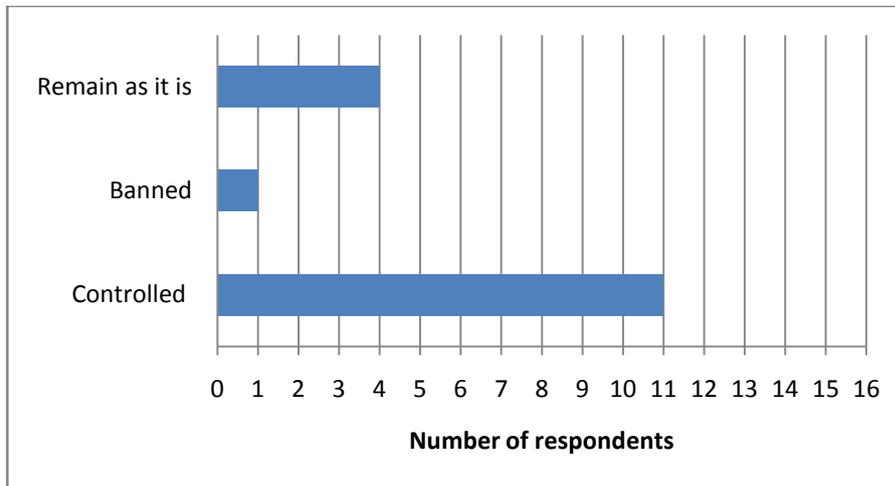


Figure 11. Parents' views on regulating the advertisement of unhealthy foods

"After watching ads, my child demands that we buy Horlicks, Tang, and Coke. If we refuse and he has money, he buys them himself."

Eleven of the sixteen parents interviewed felt that unhealthy food ads should be controlled by a regulatory board. One-fourth of the parents thought that the ads do not require regulation. One of the parents said that these ads should be banned due to their bad effects on children.

Discussion

Several interesting issues emerged in the study, as summarized here.

Advertisements

Most of the outdoor advertising was for products other than food; 13% advertise unhealthy food, which was almost equally divided between fast food and sugar-sweetened beverages. Although this might suggest that outdoor unhealthy food advertising is not a major problem, the finding must be taken in the context of the enormous amount of outdoor advertising in general, so that a substantial number of ads for unhealthy foods exist. In some parts of the city, long stretches of the street contain shop signs or other outdoor ads for unhealthy food.

Most television ads were also for non-food items. Of those for food items, over half are for different types of unhealthy food, particularly for sugary drinks: soft drinks, energy drinks, artificial juice, and so-called nutritional beverages.

The quantity of unhealthy food ads varied considerably both by time of day and by TV channel. While some channels had very few or no ads for unhealthy food (BTV, Channel I, Star Plus), others had large numbers, particularly in the later time segment (8-9 pm).

Sony, Cartoon Network, and Channel 24 all showed a considerable number of ads for various unhealthy foods, up to a total of ten ads for chocolate (Cartoon Network) and ten for soft drinks (Channel 24) in one one-hour segment. Although Channel 24

is a news channel that targets adults, the other two channels that showed many ads for unhealthy food and SSBs (Sony and Cartoon Network) both target children.

A study conducted by RECPHEC in 2013 on advertising of unhealthy food in Nepal found that Nepali and Indian TV channels that target children advertise far more unhealthy foods than do channels that target adults, and that the ads were full of misleading information, including about the supposed nutritional benefits of the foods advertised.^{xvi}

Most ads in newspapers were for products other than food. Of those for food, about one-third were for unhealthy foods. Despite this relatively low prevalence, there were still a number of ads for unhealthy foods and drinks in the newspapers, with as many as twelve ads (total across 16 newspapers) on one day. Compared to TV, the saturation of newspapers with unhealthy food ads was minor.

One obvious explanation for having far fewer ads for unhealthy food in newspapers than on TV is the target audience, as children are unlikely to read the newspaper.

Effect of advertising on children

Companies would not spend billions of dollars on advertising unhealthy foods if those ads did not affect purchasing patterns. It is known that greater exposure to ads makes consumers more likely to purchase the advertised product. Children are particularly susceptible due to their inability to distinguish between programming and advertising, and their lack of critical analysis of the messages in advertising. Research has also shown that exposure to advertisements for unhealthy foods lead directly to an increase in consumption.^{xvii}

Virtually all of the children say that they watch TV, and most of them say that they see unhealthy food ads on TV. Almost two-thirds say that they like the unhealthy food ads, and slightly more than that say that they push their mothers to buy unhealthy food. People are normally not aware of the influence that advertising has on their behaviour, so a question as to whether the ads influence them to pressure their mothers to buy the products would have been meaningless.

High awareness of brands of sugary drinks

The children, all aged 7-10, were very aware of the names of different sugary drinks. While most of the children could name three green leafy vegetables and three brands of sugary drinks, children could not name more than six types of leafy vegetables, while they could name as many as ten different types of sugary drinks. It is important to note that the names of green leafy vegetables are taught in school. The interviewers suspected that the children would not have been able to identify the vegetables by sight. These could be interesting subjects for future study.

Parents' unhealthy food purchases

All of the parents interviewed say that their children push them to buy unhealthy food, especially chips and various sugary drinks: artificial juice, soft drinks, energy drinks, and "health drinks" such as Horlicks. While parents believe that children have various ways of learning about unhealthy food, the most common response is from watching TV, followed by the parents having bought it before, and seeing other

friends eat it. That is, the parents in our small sample are very aware that TV can have an influence on children's perception of food choices.

Parents are somewhat aware of the need to do something about the pervasive ads for unhealthy food. Most of the parents felt that unhealthy food ads should be controlled by a regulatory board, while one-fourth think that the ads are just fine and can remain as they are. One of the parents said that these ads should be banned due to their bad effects on children. Given the small amount of attention to date that addresses the problem of unhealthy food advertising targeting children in Bangladesh, it is not surprising that parental concern was not greater.

There is precedence for banning ads for harmful products. In Bangladesh, ads for tobacco, alcohol, pharmaceuticals, and breastmilk substitutes for infants under six months of age are already banned.

Recommendations

Although this study focuses on the unhealthy food advertisement environment, a bigger concern is with NCDs overall. Various actions are also needed in order to address the other major NCD risk factors, specifically tobacco use and physical inactivity.

Recommendations regarding NCDs overall

Establish a health promotion foundation funded by the 1% surcharge on tobacco products. Over time, add funding from surcharges on other unhealthy products such as unhealthy foods and other disease- or injury-causing products and those harmful to the environment such as TV, cars, motorbikes, and bottled water.

Proposals for all new projects and industries should receive permission from the Ministry of Health after an assessment of whether they are likely to increase the incidence of non-communicable disease.

Recommendations regarding unhealthy food

Research has shown that just as advertising for unhealthy food influences food purchases, so also advertising for healthy food can influence purchases, encouraging healthier eating. Practical experience makes clear that higher taxes on unhealthy foods reduces their consumption. Ideally those taxes should go into efforts to reduce consumption of unhealthy foods and to promote healthy ones.

Another important initiative is seen in the recent Brazilian Dietary Guidelines, issued by the Ministry of Health in 2014.^{xviii} The guidelines recommend completely avoiding ultra-processed foods such as soft drinks and junk food.

Mexico passed a 10% tax on sugar-sweetened beverages in October 2013. The tax also increases the price of junk foods (those high in saturated fat, sugar, and salt) by 8%. Other countries to have higher taxes on unhealthy foods include Norway, Samoa, Australia, France, Hungary, and Denmark.^{xix} The results have been a 10% decline in purchases of sugary drinks. In 2014, over half of voters in San Francisco and well over two-thirds in Berkeley, California, considered a similar tax. The tax was passed in Berkeley in November 2014; the tax will raise the price on sugar-sweetened beverages and allocate funding from the tax to health promotion. Other cities are keen to do likewise despite strong opposition from the beverage industry which knows that such a tax will likely prove effective at reducing consumption of harmful drinks.^{xx}

Our recommendations are:

- Draft a policy on the restrictions of unhealthy foods and promotion of healthy foods. Use the recent Brazilian dietary guidelines (2014) as an example. Include the following elements:
- Require a labeling of ingredients, contents, and, where appropriate, health warnings on all processed foods.
- Increase the tax and establish a health surcharge on all heavily processed foods.
- Ban on advertisements, sponsorship, and promotion of unhealthy foods.
- Increase the availability of fresh fruits and vegetables and minimally processed foods (grains, dal), especially those grown and harvested without chemicals.
- Promote the consumption of fresh fruits and vegetables and minimally processed foods (grains, dal).
- Educational institutions should not serve unhealthy foods or sugar-sweetened beverages.

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In 1991, Sweden banned television advertising aimed at children under the age of 12.
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Recommendations regarding physical activity

Various policies have been developed in Bangladesh that address the need for outdoor public areas where residents can engage in physical activity and active recreation. These include the Local Government (City Corporation) Act of 2009, the Water Act 2013, the National Education Policy of 2010, the Recreation Act [JatiyoKriyaNiti] of 1998, and the Proposal for the Development of Open Space. Their recommendations include:

- Parks, open spaces, and trees need to be created and preserved and trees need to be planted and cared for along streets, footpaths, and other public areas in order to provide residents with places for recreation and physical activity.
- River banks and dams must be preserved and turned into places that can be used for active public recreation.
- All educational institutions must have playing fields and other facilities for their students' physical and mental recreation. All new educational institutions must have a playing field.
- All people, male and female, should have easy access to active recreation.

In addition, we recommend good policies for keeping all parts of the city mixed use in order to decrease trip lengths and thus prioritize trips made without the use of fuel; expansion, maintenance, and preservation of public space; and policies to improve conditions for walking and cycling in cities. Our recommendations include the following:

- Urban planning should include parks and playing fields for the use of residents throughout the city so that all children can safely travel to a nearby public space. Where no local public space exists, streets should be closed off for a couple of hours each week so that children can play outdoors close to home. Places currently used for the disposal of trash and the parking of cars could also be converted into local public spaces.
- Where there is no public space in a locality, if there is a playing field as part of a school or university, that playing field should be open for public use at times when it is not in use by the educational institution to which it is attached.
- All wards throughout the city should have public spaces and local councilors and community organizations should play a role in creating and preserving them.
- Some fields should be reserved for the use of females only. All-female schools and colleges should begin this process.
- Sufficient funding should be available to local government and local organizations to carry out the above activities.
- Development should be carried out in such a way as to preserve local water bodies and to ensure a good environment for walking along the water body, including the planting of trees, provision of shade, the prevention of pollution/waste, and adequate dustbins.
- A green network should be created throughout the city so that all residents have access not only to public space but to the mental health benefits of greenery. A map should be created to show where such areas exist in the city and efforts should be ongoing to keep the green network in good condition and usable for all.
- All streets should have proper infrastructure for walking. A bicycle network should also be created throughout cities to allow people to cycle safely on protected lanes.
- To improve the attractiveness of walking for all, including the elderly and those with disabilities, benches, shade, public toilets, and other facilities should be provided. All footpaths should be level, smooth, and easily accessible by those with disabilities, utilizing Universally Accessible Design.
- Vendors should be licensed throughout the city to provide healthy, affordable, local fresh foods at low cost and to increase attraction and safety for those on foot.
- All new residential areas should include sufficient greenery and usable public space for outdoor active recreation. Policies can be considered whereby the lift only stops on alternate floors. Adequate provision for those with disabilities must be included, which also requires the preservation of ground floor apartments.

Recommendations regarding tobacco control

- The Tobacco Control Act 2005 should be properly implemented throughout the country.
- Tax on all tobacco products should be regularly increased above the level of inflation so as to gradually decrease their affordability.
- Develop a policy to discourage cultivation of tobacco. Support farmers to switch to alternate crops, especially fruits and vegetables grown without chemicals. Support could also be given to those currently employed in growing or processing tobacco, including to process local fruits and vegetables (in a healthy fashion) so as to increase their consumption throughout the year and decrease imports of fruit and vegetable products from other countries.

Conclusion

Given the contribution of unhealthy foods to illness and early death, it is time to view the problem seriously. Just as it is no longer acceptable to serve tobacco in meetings, and as tobacco ads are banned, so too it should no longer be acceptable to serve soft drinks or junk food in meetings or to allow their advertisements.

The growing attention to the problem of NCDs provides an opportunity for significant action in Bangladesh. The possibilities are even greater with the recent decision to add a one percent surcharge to cigarettes to fund health promotion. The progress made in tobacco control needs to serve as an example for tackling the issues of unhealthy diet and insufficient physical activity. The promotion of unhealthy foods needs to be restricted/banned, and other measures taken to decrease their consumption and increase the consumption of healthy foods, as well as other healthy lifestyle changes. A strong, coordinated, multi-sectoral approach to the prevention of NCDs through policies will lead to better health and a more vibrant economy. It is time to act now.

Appendices

Appendix 1. Questionnaire for parents

1. Do your children push/encourage you to buy any food?

Yes

No if yes, which one (check all that apply)? Fast food Chips
Soft Drinks/Energy drinks

2. How do you think your child knows about this product?

- Saw it on tv
- Saw it on a billboard
- Saw it in the newspaper (unlikely – but possible)
- Their friends have it
- We bought it for them before
- Don't know

3. What exactly your children say/do when they see an advertisement of Junk food and ask you to buy it? (Please record this statement)

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4. Do you think that advertising to children should be:

- Better regulated by the government to make sure they are truthful
- Banned
- Nothing – advertisements are fine as they are

5. Do your children push/encourage you to buy any food?

Yes

No if yes, which one (check all that apply)? Fast food Chips
Soft Drinks/Energy drinks

6. How do you think your child knows about this product?

- Saw it on tv
- Saw it on a billboard
- Saw it in the newspaper (unlikely – but possible)
- Their friends have it
- We bought it for them before
- Don't know

7. What exactly your children say/do when they see an advertisement of Junk food and ask you to buy it? (Please record this statement)

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8. Do you think that advertising to children should be:

- Better regulated by the government to make sure they are truthful
- Banned
- Nothing – advertisements are fine as they are

Appendix 2. Questionnaire for children

Name:

²Age:.....

1. How many soft drinks/energy drinks'/artificial juice name do you know?

- Pepsi (Soft Drink)
- Coca-Cola(Soft Drink)
- Mountain Dew(Soft Drink)
- RC Cola(Soft Drink)
- Fanta (Soft Drink)

² Age of the child must be within 7-10 years

- Sprite(Soft Drink)
- Fruto (Artificial Juice)
- Frutika (Artificial Juice)
- Speed (Energy drink)
- Power (Energy Drink)
- Complian (Health drink)
- Boost (Health Drink)

2. How many green leafy vegetable's (shak) name do you know?

- Lalshak
- Kochushak
- Puishak
- Lau shak
- Palongshak
- Kolmishak
- Others.....

3. How many programs do you watch in TV each day?

Number and name of programs	Time length

4. Do you know what this ad (randomly selected advertisement) is trying to sell? Yes/No. If yes, what:

- Soft drinks Energy drinks Chips Fast food Bottled juice
- Others (Specify).....

Do you like this ad?

- Yes No

If yes, Why do you like this ad?

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5. Is there any food that you want your mother to buy for you?

- Yes No.

If yes, what?.....

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