

Monitoring complaints about food marketing to children under the Australian industry Codes 2015–20: a qualitative analysis

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Regulation of food marketing to children is widely recognised as key to addressing childhood obesity rates.^{1,2} A review of evidence-based obesity prevention interventions for the Australian context found legislation restricting television advertising of unhealthy foods a cost-effective obesity prevention initiative.³ Addressing marketing of unhealthy foods in publicly-controlled settings and marketing associated with sport and major community events were promising interventions.³ Reducing advertising of, and exposure to, unhealthy food and drinks was one of the top five focus areas raised by participants in the 2020 consultation on the National Obesity Strategy⁴ and was listed in the draft National Preventive Health Strategy, released in March 2021.⁵

In 2009, the Australian food industry introduced two self-regulatory Codes to address food and beverage advertising to children, the Responsible Children's Marketing Initiative (RCMI) for grocery products and the Quick Service Restaurant Initiative for Responsible Advertising and Marketing to Children (QSRI) for fast food.⁶ Within the RCMI, healthiness of foods appropriate for advertising is defined by individual company criteria, and the QSRI includes specific energy and nutrient criteria for a 'children's meal' but no other fast food products.⁷ The Australian Association of National Advertisers (AANA) has self-regulatory Codes relevant to protecting children from unhealthy food advertising, the Code of Ethics, the Code of Advertising and Marketing to Children and the Food

Abstract

Objective: To analyse the case reports of complaints regarding food marketing to children over six years and compare Australian marketing Codes to best practice recommendations.

Methods: Case reports on complaints about food marketing to children under the five industry Codes – the Responsible Children's Marketing Initiative, the Quick Service Restaurant Initiative and the Australian Association of National Advertisers Code of Ethics, Code of Advertising and Marketing to Children and Food and Beverages Code – were qualitatively analysed. Reports on the Ad Standards website in the food/beverage groceries and food/beverage venues categories from 2015–2020 were investigated. The most common clauses from the Codes were identified and quotes from reports used to illustrate the determinations. Codes were compared with World Cancer Research Fund recommendations on policy to protect children.

Results: Only 14 of 119 complaints resulted in a reported breach of industry Codes. The most common reason for dismissing complaints involved clauses requiring advertisements to be 'primarily' directed to children. The Codes did not align with best practice recommendations.

Conclusions: Complaints by the public show concern for food advertising to children but the Australian industry Codes fall short of addressing those concerns.

Implications for public health: Government regulation is required to protect children from unhealthy food marketing.

Key words: food marketing, children, advertising, self-regulation

and Beverages Code.⁷ Previously, companies were voluntary signatories to the RCMI and QSRI, however, in June 2019 an additional clause in the Food and Beverages Code required compliance with the RCMI or QSRI, meaning all food and beverage advertising should comply with these Codes.⁷ From July 2020, these two Codes came under the management of the AANA.⁷

The self-regulatory Codes in Australia have not changed the rate of children's exposure to food advertising on television^{8,9} or in outdoor settings.^{10,11} Globally, while industry-sponsored reports indicate high adherence to voluntary Codes, peer-reviewed papers

show self-regulatory Codes have failed to reduce children's exposure to unhealthy food advertising.¹² Since 2010, the World Health Organization (WHO) has had a set of recommendations to reduce both the exposure of children to, and power of, marketing of foods.¹³ The 2012 WHO framework for implementing those standards provides a broad range of options and factors to consider when developing a policy.¹⁴ The 2020 World Cancer Research Fund (WCRF) *Building Momentum* report has built on that framework and collated international experience on best practice policy in five main areas: legal measures needed, who

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should be protected, forms and levels of marketing to be restricted, and which foods and beverages should be restricted.¹⁵

A complaints program managed by Ad Standards supports the Australian advertising Codes.¹⁶ Complainants lodge complaints regarding advertising through an online form on the Ad Standards website or by post.¹⁶ Ad Standards convenes a Community Panel (the Board) responsible for reviewing these complaints.¹⁶ Decisions on the outcomes of complaints are reported on the website in a case report that summarises what the complainant/s said, the advertiser's response, deliberations and final outcome (dismissed or upheld).¹⁷ Complaints about the same advertisement are grouped together with, typically, one case report per advertisement. There has been no independent critique of these complaints to understand whether the Codes address complainants' concerns. This paper aims to qualitatively analyse the case reports of complaints to Ad Standards, regarding unhealthy food marketing to children, published over the last six years, and compare the Codes with best practice recommendations from WCRF.

Methods

Complaints listed on the Ad Standards website¹⁷ under community panel cases in the food/beverage groceries and food/beverage venues categories from 2015 to 2020 were identified. Case reports were briefly read to determine if the case pertained to food marketing to children. This study is focused on unhealthy food and drink marketing to children and therefore cases referring to language, violence, sex/sexuality and nudity, social values (discrimination, vilification) or unsafe behaviour were excluded. We downloaded case reports and recorded in an excel spreadsheet whether the complaint was upheld or dismissed, the advertising medium (e.g. television, online), the food category the complaint referred to and the advertising Codes and clauses within those Codes that were identified in the determination. Descriptive statistics were used to describe the nature of the data.

The case reports referred to five Codes, the RCMI, QSRI and three AANA Codes: Code of Ethics, Code of Advertising and Marketing to Children and Food and Beverages Code. Each code contains clauses (Supplementary Table 2) that the complaint is judged against.

Two researchers carried out a content analysis of the case reports, capturing mentions of clauses from the Codes and an associated quote. Initially, eight case reports were coded independently and compared to ensure agreement on interpretation. There was good agreement and no new clauses found. Any concerns were highlighted and discussed between the researchers, and a third researcher also scanned the analyses for consistency. We identified illustrative quotes by case report, a four-digit number followed by the last two digits of the year, for example, 1234/20.

We classified foods advertised as five food group (core part of a healthy diet) or discretionary (not part of a healthy diet) or a combination according to the Australian Dietary Guidelines.¹⁸ The Codes were compared with recommendations in the WCRF report *Building Momentum: lessons on implementing robust restrictions of food and non-alcoholic beverage marketing to children*.¹⁵

Results

We identified 119 complaints about unhealthy food marketing to children from 2015 to 2020. Of those, 14 (11.8%) were upheld, ranging from one to four complaints upheld per year. All advertisements, advertisers and results of complaints are listed in Supplementary Table 1 along with the identifier case report number referred to in the results. Most complaints were for discretionary foods (91.6%) and the most common food categories were fast food meals (49.6%), confectionery (13.4%) and soft drinks (13.4%) (Table 1). There was a variety of media featured, with 42.9% internet/apps/social media, 30.3% television and 20.2% outdoor, including transport and billboards (Table 1).

A total of 571 Code clauses were identified in 119 case reports. Supplementary Table 2 provides a summary of the most commonly considered clauses in the five Codes, the case reports where a breach of the Code was identified, the frequency of clause mentions, and example quotes from case reports to illustrate the Ad Standards ruling on each clause.

Responsible Children's Marketing Initiative

There were 44 case reports (37.0%) considered by Ad Standards against the RCMI

Table 1: Characteristics of food advertisements in complaint case reports by Ad Standards 2015–20.

		n	%	
Dietary Guideline category	Five food group	7	5.9	
	Discretionary	109	91.6	
	Five food group & discretionary	3	2.5	
Food category	Cereal	4	3.4	
	Confectionery	16	13.4	
	Dairy	3	2.5	
	Fast Food ^a	59	49.6	
		Donuts	6	10.2
		Drinks	2	3.4
		Ice cream	4	6.8
		Main meals	47	79.7
		Ice cream/sweet snacks/cereal bars	14	11.8
		Savoury snacks	5	4.2
		Soft drink	16	13.4
		Combination of categories	2	1.7
	Year	2015	16	13.4
2016		12	10.1	
2017		28	23.5	
2018		25	21.0	
2019		21	17.6	
2020		17	14.3	
Medium	Internet/social media/app/email	51	42.9	
	Television	36	30.3	
	Billboard/out of home/transport	24	20.2	
	Print/promotional	7	5.9	
	Radio	1	0.8	

Note:

a: Fast Food category is sub-categorised and % calculated for the fast food category

and six complaints were upheld. There were two upheld cases on television regarding placement; the advertisement was placed in a medium where >35% of the audience was children (0117/17), and the target audience was considered primarily children in the case of a children's movie (0511/15). Two advertisements were upheld because they had themes directed to children (0512/16, 0204/15). An interactive billboard (0347/17) and an app (0206/15) were found to breach the Code as interactive games directed primarily to children must be consistent with healthy lifestyle messaging.

Quick Service Restaurant Initiative

Fifty-one advertisements (43%) were considered by Ad Standards under the QSRI, and seven complaints were upheld. Five upheld complaints were for vouchers given to children at sporting events (0294/20, 0295/20, 0299/20, 0116/19, 0208/18), one a children's app (0545/18) and the other a television advertisement placed in shows with over 35% children in the audience (0080/20).

AANA Code of Ethics

Eleven case reports (9%) referred to the Code of Ethics but there were no breaches found.

AANA Food and Beverage Advertising Code

Most of the advertisements (n=109, 92%) were considered by Ad Standards under the Food and Beverage Code and one, case report 0072/17, was found to breach the clause regarding undermining the importance of healthy or active lifestyles.

AANA Children's Advertising Code

Although 88 (74%) advertisements were considered by Ad Standards under the Children's Code, only eight qualified for further consideration according to the definitions and none were upheld.

Reasons given in case reports for complaints not breaching the clauses in the Codes

Directed primarily to children (placement or content) or with an audience ≥ 35% children

The Codes specify advertisements should not be 'primarily' directed to children and it was often determined the advertisement was aimed at the parent or main grocery buyer

as well as children therefore negating the complaint that it was targeting children.

A minority of the Panel considered that the advertisement was for a product of principal appeal to children and featured visuals including bright yellow background and toys which would be of appeal to children... The majority of the Panel considered that the theme of the advertisement was that Peter Rabbit toys are currently available with Happy Meals...this is a theme that would appeal to children and to parents who would like to buy a treat for their children. (McDonald's, Happy Meal 0216/18)

Another common interpretation was the use of child-friendly techniques not 'primarily' directed to children but targeting adults in a 'nostalgic' way.

Just like a white chocolate milkshake only crunchy' would be of appeal to children, but is also a version of a phrase that has been used for many years and would be nostalgic for many adult grocery buyers. (Kellogg, Coco Pops cereal 0265/20)

Visuals that would appeal to children such as cartoons or imaginary scenes were determined of interest to a general audience and therefore not 'primarily' appealing to children.

... the sandcastles and camping, would have appeal to children but...on balance the visuals were equally as appealing to adults and were not directed primarily to children. (Mondelez Australia, Cadbury Oreo chocolate bar 0299/16)

In requiring children to be at least 35% of the audience, the placement clause excludes internet sites and outdoor signage, considered to have a low child audience relative to the overall population exposed to the advertisement.

... the audience that would view a transport advertisement in the Sydney metro region... based on that data the Panel considered that the audience of this advertisement would not be comprised of more than 35% children. Population is only 18%. (Hungry Jack's, Bursties drink 0403/19)

Prevailing community standards

The clause relating to prevailing community standards in the AANA Codes requires interpretation by the Board. The following example shows disagreement within the Board on interpretation of the use of cartoon characters, although it was determined by the majority to not breach community standards.

A minority of the Board considered that it is contrary to prevailing community standards

on health and safety to market a product that is unsuitable for children using well recognised cartoon characters that are attractive to children. (Fruco Beverages, V energy drink 0135/15)

Under the AANA Codes, where there are no clear nutrition criteria, prevailing community standards are referenced as allowing the advertising of unhealthy food.

The promotion of a product which may have a particular nutritional composition is not, per se, undermining the importance of a healthy or active lifestyle or contrary to prevailing community standards. (Baker's Delight, M&M Mini finger buns 0072/17)

Encouraging excessive consumption

While often considered, the clause regarding encouraging excessive consumption was never upheld.

... the appeal of the promotion is the collection of the toys and although this would mean the purchase of the chocolate, the focus is on the toys ... there is no suggestion to eat 10 eggs successively and that the consumption would not necessarily be by one person. (Ferrero Australia, Kinder Surprise Chocolate Egg 0345/17)

... the advertisement depicts three women sharing the bucket of popcorn chicken and considered that we do not see the women finishing the bucket. (KFC, \$10 Popcorn Chicken bucket 0275/17)

Good dietary habits and physical activity

The RCMI and QSRI have nutrient criteria as well as a clause stating the advertisement should encourage good dietary habits and physical activity. In some cases that clause is met with simple additions to the advertisement.

... the advertiser had taken measures to encourage physical activity and include messaging about good dietary habits including a voiceover (when activated) that says "healthy food is fun and delicious". (McDonald's, Happy Meal 0281/15)

The Children's Code clause states the advertisement should neither encourage nor promote an inactive lifestyle or unhealthy eating or drinking habits and fast food advertisements meet part of this clause by featuring exercise.

... we do see the participants outside, running, singing and playing backyard cricket which is suggestive of exercise, and overall the advertisement is not disparaging of healthy or active lifestyles ... the advertisement depicts groups or families sharing various KFC items

Table 2: World Cancer Research Fund recommendations for marketing to children compared to industry Codes.^a

What legal measure should be used?	
WCRF	Government-led mandatory restrictions
RCMI	Industry Code
QSRI	Industry Code
AANA Code of Advertising and Marketing to Children	Industry Code
AANA Food and Beverages Code	Industry Code
Who should be protected?	
WCRF	Children up to 18 years of age
RCMI	Under 12 years
QSRI	Under 14 years
AANA Code of Advertising and Marketing to Children	14 years old or younger
AANA Food and Beverages Code	14 years old or younger
Which forms of marketing should be restricted?	
WCRF	All forms of marketing should be included in restrictions to ensure that children's exposure is limited across all media and settings
RCMI	Television, radio, print, cinema, internet sites
QSRI	Television, radio, newspaper, magazines, outdoor billboards and posters, emails, interactive games, cinema, and internet sites
AANA Code of Advertising and Marketing to Children	Any medium whatsoever including without limitation cinema, internet, outdoor media, print, radio, television, telecommunications, or other direct-to-consumer media including new and emerging technologies
AANA Food and Beverages Code	Any medium whatsoever including without limitation cinema, internet, outdoor media, print, radio, television, telecommunications, or other direct-to-consumer media including new and emerging technologies
What level of marketing should be restricted?	
WCRF	Define marketing as 'marketing to which children are exposed'
RCMI	Content- having regard to the theme, visuals and language used, are directed primarily to Children and are for food and/or beverage products. Placement- in Medium that is directed primarily to Children; and/or where Children represent 35% or more of the audience
QSRI	Content- having regard to the theme, visuals and language used, are directed primarily to Children and are for food and/or beverage products. Placement- placed in Medium that is directed primarily to Children; and/or where Children represent 35 per cent or more of the audience
AANA Code of Advertising and Marketing to Children	Having regard to the theme, visuals and language used, are directed primarily to Children and are for Product (definition of 'product' - targeted toward and have principal appeal to Children)
AANA Food and Beverages Code	Having regard to the theme, visuals and language used, are directed primarily to Children and are for a Children's Food or Beverage Product (definition of 'product' - targeted toward and has principal appeal to children)
Which foods and beverages should be restricted?	
WCRF	Use a nutrient profile model to decide which products are in scope of the restriction
RCMI	Represent healthier dietary choices, consistent with established scientific or Australian government standards, as detailed in Signatories' Company Action Plan; and b. Reference, or be in the context of, a healthy lifestyle, designed to appeal to Children through messaging that encourages: i. Good dietary habits, consistent with established scientific or government standards; and ii. Physical activity
QSRI	Represent healthier dietary choices, as determined by the Nutrition Criteria; and b. Reference, or be in the context of, a healthy lifestyle, designed to appeal to Children through messaging that encourages: i. Good dietary habits, consistent with established scientific or government standards; and ii. Physical activity
AANA Code of Advertising and Marketing to Children	Must neither encourage nor promote an inactive lifestyle or unhealthy eating or drinking habits
AANA Food and Beverages Code	Shall not undermine the importance of healthy or active lifestyles nor the promotion of healthy balanced diets or encourage what would reasonably be considered as excess consumption through the representation of product/s or portion sizes disproportionate to the setting/s portrayed or by means otherwise regarded as contrary to Prevailing Community Standards ^b

Notes:

a: Some words removed from clauses if it did not change the context

b: not specifically children

WCRF World Cancer Research Fund International 2020 Building momentum: lessons on implementing robust restrictions of food and non-alcoholic beverage marketing to children¹⁵; RCMI Responsible Children's Marketing Initiative; QSRI Quick Service Restaurant Initiative; AANA Australian Association of National Advertisers

including buckets of chicken. (KFC chicken 0561/17)

Undermining parental authority

There were no breaches under this clause in the AANA Children's Code. This is unsurprising as shown when the Board addressed its interpretation of 'undermining parental authority' in case 0336/15.

... to interpret any marketing which is attractive to a child as amounting to 'pester power', without any direct or obvious appeal to children to ask their parents for the product, would have the effect of banning all advertising to children. (McDonald's, Happy Meal 0336/15)

Consequences of breaches

There are no consequences or follow-up after a complaint is upheld, even after multiple breaches of the same clause. For example, in two consecutive years, McDonald's was found to breach the QSRI for offering sporting vouchers for unhealthy food.

Challenges in interpreting case reports

The layout of the case reports has changed in the years surveyed, although the Codes have not. We captured the Codes and clauses mentioned in the reports, but they are not consistently laid out or do not thoroughly cover all clauses in each case. Not all Codes or clauses are considered in each case report, for example, according to case report 0208/18 the Children's Code was not considered despite a complainant saying, "As a parent, I am angry that while participating in weekend soccer my child was given a 'man of the match' award."

Interpretation of clauses has changed over time. For example, within one year there was a different interpretation on an interactive billboard.

The Board noted that it had previously considered in case 0230/17 that the medium of an interactive billboard did not fall within the definition of medium and therefore the RCMI did not apply. The Board noted that the RCMI was last updated in 2014 and that the nature of advertising and marketing is evolving rapidly. The Board considered that as the billboard is interactive and the material on that billboard is a game, it is more correct to characterise the material as an interactive game which therefore brings it within the scope of the RCMI. (Ferrero Australia, Kinder Surprise Chocolate Egg 0347/17)

The categorisation of medium has varied, for example more sub-categories have been added such as a transport category specifically for billboards on transport facilities and sports vouchers were classified as print and are now promotional material.

Comparison to international recommendations

All Codes fall short in comparison to WCRF recommendations (Table 2). WCRF recommends government-led mandatory restrictions whereas these Codes are industry-led. The Codes vary in definition of children, however most use under 14 years whereas best practice suggests children are defined as those under the age of 18. WCRF suggests all forms of marketing should be included in restrictions, but each Code varies in the media covered, and even in the case of the AANA codes that state 'any medium' they do not cover all media such as product packaging and sponsorship. Best practice states that marketing should include any that children are exposed to. The most common area that complaints fail to be upheld is because, contrary to this advice, the Codes define both content and placement of advertising as that 'primarily' directed to children and excludes any a general audience may see or find appealing. WCRF recommends a nutrient profile model be used to define what constitutes 'unhealthy', but the food Codes use a variety of definitions; none government-endorsed, and the AANA Codes refer to 'healthy lifestyle' without a clear definition.

Discussion

Complaints related to the food industry Codes (RCMI and QSRI) are rarely (11%) upheld, while complaints against the AANA Codes are almost never upheld; we identified one in six years (0.8%). Even the advertiser's Code to protect children, the AANA Children's Code, is very rarely considered. Despite complainants believing these advertisements expose children to unhealthy food advertising, the wording in the Codes allows them to be disregarded as the term 'primarily' directed to children is interpreted as specifically children and not others. Placement clauses allow children to be exposed to an advertisement, for example, on a bus shelter going to school or in the early evening on a family television show as they would not make up a high proportion of the audience. These results

show children are exposed to advertisements that the community is concerned about and that there is evidence of causing harm.¹⁹⁻²¹

Failings in the RCMI were identified in 2010²² and our findings reflect international experience of the inadequacy of self-regulatory codes.^{12,23,24} New Zealand researchers found very few complaints upheld in recent years under the New Zealand Code designed to protect children from unhealthy food advertising, and like this study, found limitations in the Code definitions around 'targeting children or young people' and the requirement for children to be 25% (in this case) of the audience.²⁵ Studies into the extent of advertising in various media have found industry Codes fail to protect children from unhealthy food advertising, in Australia⁸⁻¹¹ and internationally.^{23,26,27} Like our findings, a review found industry Codes to be vague, permissive and ineffective.²⁸

Worldwide, industry Codes are common¹² and that is likely because of the economic power of industry.^{29,30} The power of the food industry used as self-serving political power has been cited as the largest barrier to policy action.³¹ Industry has strong links to decision makers,³² as illustrated in Canada during discussion on a Bill regarding marketing to children where industry stakeholders interacted with government much more than non-industry stakeholders.³³ The WCRF report refers governments to the experience of other countries to address tactics – summarised as delay, deflect, divide and deny – used to undermine policy development.¹⁵ To counter this, it will take global networking and capacity building within civil society to demand political commitment.³¹

Our study highlights where the food and advertising industry Codes are inadequate compared with international standards described in the WCRF *Building Momentum* report.¹⁵ Protecting children from unhealthy food marketing has been highlighted as a human rights issue¹⁵ and, by applying policy to children up to 18 years of age, best practice ensures a commitment to protect children's rights within marketing regulation.¹⁵ Definitions of what types and levels of marketing to include should also align with World Health Organization recommendations to reduce the exposure of children to, and the power of, the marketing of unhealthy foods.¹ Finally, a clear definition of what is unhealthy food is needed within policy.¹⁵ Both the RCMI and QSRI, have nutrition criteria although

problems with these criteria have been highlighted and there have been calls to change them to a consistent, independent criteria.³⁴⁻³⁶ Recent research has shown the Australian government-designed criteria for defining foods that should not be marketed to children is an easy to use, evidence-based tool that should be incorporated into new regulation.³⁶

Robust, clear and evidence-based mandatory restrictions are the most effective way to restrict marketing aimed at children and adequately protect them from exposure.¹⁵ Such regulations are required in Australia. Government regulation also provides transparency, independence and tools to assist in enforcing restrictions on food advertising.²⁴

This study is limited by the information provided in the case reports and could not correct for errors or inconsistencies within the case reports. This analysis did not scrutinise the integrity of the case reports. However, it is the first analysis in Australia of case report content. As well, it cannot be seen as an indication of the concern in the community as some complaints are not issued with case numbers because they are considered outside the charter, examples include a well-known fast food logo on a bus; or cases where the advertiser removed the advertisement before the complaint was considered. The system requires a complainant to take the time to lodge a complaint and we are aware that some of those complaints are raised by public health organisations that do not have the resources to monitor advertising, so complaints are made on an ad hoc basis. For the community to lodge complaints requires a committed effort to find out where and how to complain and then to log the details. Therefore, there may be levels of concern in the community but not the motivation to lodge a complaint.

Conclusions

These findings add to the established evidence in Australia about the ineffectiveness of self-regulatory processes to protect children from exposure to advertising. We used an alternative approach; a qualitative investigation of complaints under the industry Codes and then compared the key clauses in the Codes to best practice. Complaints made by the public show concern for food advertising to children, but the industry Codes fall short of addressing those

concerns. The overwhelming evidence of the failings of the industry Codes requires government efforts to address concerns and protect children from unhealthy food marketing.

Implications for public health

Australia needs a strong policy on food marketing to children as identified in the draft National Preventive Health Strategy and the 2020 consultation on the National Obesity Strategy. There is no place for complacency in thinking the industry Codes are adequate. With high rates of obesity in children and evidence of the effectiveness of food marketing regulation, government leadership is urgently needed to regulate food marketing to children.

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References

- World Health Organization. *Report of the Commission on Ending Childhood Obesity*. Geneva (CHE): WHO; 2016.
- World Health Organization. *Best Buys and Other Recommended Interventions for the Prevention and Control of Non Communicable Diseases, The Updated Appendix 3 of the WHO Global NCD Action Plan 2013-2020*. Geneva (CHE): WHO; 2017.
- Sacks G, Looi E, Cameron A, et al. *Population-level Strategies to Support Healthy Weight: An Evidence Check Rapid Review Brokered by the Sax Institute for Queensland Health*. Sydney (AUST): Sax Institute; 2019.
- COAG Health Council. *Have Your Say on a National Obesity Strategy Consultation Report November 2020*. Canberra (AUST): Australian Department of Health; 2020.
- Department of Health (AUST). *Draft National Preventive Health Strategy 2021-2030*. Canberra (AUST): Government of Australia; 2021.
- Australian Food and Grocery Council. *2018 Annual Compliance Report for the RCMI and QSRI*. Canberra (AUST): AFGC; 2019.
- Australian Association of National Advertisers. *Codes and Guidelines* [Internet]. Sydney (AUST): AANA; 2020 [cited 2020 Nov 20]. Available from: <https://aana.com.au/self-regulation/codes-guidelines/>
- Watson WL, Lau V, Wellard L, et al. Advertising to children initiatives have not reduced unhealthy food advertising on Australian television. *J Public Health*. 2017;39(4):787-92.
- Smithers LG, Haag DG, Agnew B, et al. Food advertising on Australian television: Frequency, duration and monthly pattern of advertising from a commercial network (four channels) for the entire 2016. *J Paediatr Child Health*. 2018;54(9):962-7.
- Richmond K, Watson W, Hughes C, et al. Children's trips to school dominated by unhealthy food advertising in Sydney, Australia. *Public Health Res Pract*. 2020;30(1):3012005
- Sainsbury E, Colagiuri S, Magnusson R. An audit of food and beverage advertising on the Sydney metropolitan train network: Regulation and policy implications. *BMC Public Health*. 2017;17(1):490.
- Galbraith-Emami S, Lobstein T. The impact of initiatives to limit the advertising of food and beverage products to children: A systematic review. *Obes Rev*. 2013;14(12):960-74.
- World Health Organization. *Set of Recommendations on the Marketing of Foods and Non-alcoholic Beverages to Children*. Geneva (CHE): WHO; 2010.
- World Health Organization. *A Framework for Implementing the Set of Recommendations on the Marketing of Foods and Non-alcoholic Beverages to Children*. Geneva (CHE): WHO; 2012.
- World Cancer Research Fund International. *Building Momentum: Lessons on Implementing Robust Restrictions of Food and Non-alcoholic Beverage Marketing to Children* [Internet]. London (UK): WCRF International; 2020 [cited 2021 Jan 15]. Available from: <https://www.wcrf.org/int/policy/our-publications/building-momentum-series/lessons-implementing-robust-restrictions-food>
- Ad Standards. *Lodge a Complaint* [Internet]. Canberra (AUST): Ad Standards; 2020 [cited 2021 Feb 4]. Available from: <https://adstandards.com.au/lodge-complaint>
- Ad Standards. *Ad Standards Community Panel Cases* [Internet]. Canberra (AUST): Ad Standards 2020 [cited 2021 Feb 3]. Available from: <https://adstandards.com.au/cases>
- National Health and Medical Research Council. *Eat for Health, Australian Dietary Guidelines*. Canberra (AUST): Government of Australia; 2013.
- Norman J, Kelly B, Boyland E, et al. The impact of marketing and advertising on food behaviours: Evaluating the evidence for a causal relationship. *Curr Nutr Rep*. 2016;5(3):139-49.
- Boyland EJ, Kavanagh-Safran M, Halford JC. Exposure to 'healthy' fast food meal bundles in television advertisements promotes liking for fast food but not healthier choices in children. *Br J Nutr*. 2015;113(6):1012-18.
- Norman J, Kelly B, McMahon A-T, et al. Remember me? Exposure to unfamiliar food brands in television advertising and online advergames drives children's brand recognition, attitudes, and desire to eat foods: A secondary analysis from a crossover experimental-control study with randomization at the group level. *J Acad Nutr Diet*. 2020;120(1):120-9.
- Hebden L, King L, Kelly B, et al. Industry self-regulation of food marketing to children: Reading the fine print. *Health Promot J Austr*. 2010;21(3):229-35.
- Boyland EJ, Harris JL. Regulation of food marketing to children: Are statutory or industry self-governed systems effective? *Public Health Nutr*. 2017;20(5):761-4.
- Reeve B, Magnusson RS. Regulation of food advertising to children in six jurisdictions: A framework for analyzing and improving the performance of regulatory instruments. *Ariz J Int Comp Law*. 2018;35(1):71.
- Sing F, Mackay S, Culpin A, et al. Food advertising to children in New Zealand: A critical review of the performance of a self-regulatory complaints system using a public health law framework. *Nutrients*. 2020;12(5):1278.
- Huizinga O, Kruse M. Food industry self-regulation scheme "EU Pledge" cannot prevent the marketing of unhealthy foods to children. *Obes Med*. 2016;1:24-8.
- Fleming-Milici F, Harris JL. Food marketing to children in the United States: Can industry voluntarily do the right thing for children's health? *Physiol Behav*. 2020;227:113139.
- Ronit K, Jensen JD. Obesity and industry self-regulation of food and beverage marketing: A literature review. *Eur J Clin Nutr*. 2014;68:753-9.
- Baker P, Machado P, Santos T, et al. Ultra-processed foods and the nutrition transition: Global, regional and national trends, food systems transformations and political economy drivers. *Obes Rev*. 2020;21(12):e13126.
- Mozaffarian D, Angell SY, Lang T, et al. Role of government policy in nutrition—barriers to and opportunities for healthier eating. *BMJ*. 2018;361:k2426.
- Swinburn B. Power dynamics in 21st-century food systems. *Nutrients*. 2019;11(10):2544.
- Cullerton K, Donnet T, Lee A, et al. Exploring power and influence in nutrition policy in Australia. *Obes Rev*. 2016;17(12):1218-25.
- Mulligan C, Jawad A, Kent MP, et al. Stakeholder interactions with the federal government related to Bill S-228 and marketing to kids in Canada: A quantitative descriptive study. *CMAJ Open*. 2021;9(1):E280-E7.
- Watson W, Johnston A, Hughes C, et al. Determining the 'healthiness' of foods marketed to children on television using the Food Standards Australia New Zealand nutrient profiling criteria. *Nutr Diet*. 2014;71(3):178-83.
- Wellard-Cole L, Hooper A, Watson WL, et al. Nutrient composition of Australian fast-food and fast-casual children's meals available in 2016 and changes in fast-food meals between 2010 and 2016. *Public Health Nutr*. 2019;22(16):2981-8.
- Watson WL, Khor PY, Hughes C. Defining unhealthy food for regulating marketing to children—What are Australia's options? *Nutr Diet*. 2021;78(4):406-14.

Supporting Information

Additional supporting information may be found in the online version of this article:

Supplementary Table 1: Summary of Case reports from Ad Standards 2015-20.

Supplementary Table 2: Content analysis of food marketing to children case reports on the Ad Standards website 2015-20 showing upheld complaints, frequency of particular clauses and extra quotes from case reports.