

25 June 2021

The Secretary
Economy and Infrastructure Committee
Parliament House, Spring Street
EAST MELBOURNE VIC 3002

Dear Secretary

The Victorian Health Promotion Foundation (VicHealth) welcomes the opportunity to respond to the Economy and Infrastructure Committee's Inquiry into the Use of School Buses in Rural and Regional Victoria.

VicHealth was established in 1987 as a statutory agency of the Victorian Government. We are a pioneer in health promotion – the process of enabling people to increase control over and improve their health. Our primary focus is promoting good health and preventing chronic disease, including promoting healthy eating and addressing the impacts of unhealthy food and drink marketing. This is particularly important for children and young people, as building healthy eating habits in the early years can set them up for life-long health.

Term of Reference 3 of the Inquiry focuses on ensuring child safety on mainstream school buses. While this will include a focus on physical safety, VicHealth strongly recommends that the Inquiry also considers how children's health can be impacted by marketing of unhealthy food and drinks within buses.

Victorian children have the right to go about their day-to-day life in spaces free from pervasive advertising. However, they are currently bombarded by extensive, sophisticated and persuasive marketing techniques used by the unhealthy food and drink industry, including when they use public transport. The marketing and availability of unhealthy products is the single greatest driver of overweight and obesity. One in four Victorian children are now overweight or obese and facing an increased lifetime risk of disease and early death. Other jurisdictions including London,¹ Amsterdam^{2,3} and Brazil,⁴ and more locally the Australian Capital Territory,⁵ have developed policies to reduce exposure to unhealthy food and drink marketing. Victorian Government and Parliament led action is needed urgently.

This is particularly important for children in rural and regional areas, many of whom spend up to 1–2 hours on school buses each day. They should be able to travel in environments that are both physically safe and free from harmful marketing, to make sure they have every chance of a healthy start to life.

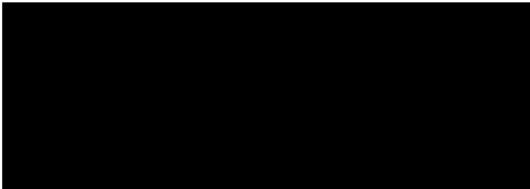
Therefore, we ask that the Committee take into account the following recommendation:

The Victorian Parliament should introduce mandatory restrictions on the marketing of unhealthy food and drinks on rural and regional school bus services, including where extended for use by the wider public.

We strongly recommend that such a measure is mandatory and applied to unhealthy food and drink products, in addition to brands commonly associated with unhealthy food and drinks, to ensure the greatest benefits to Victorian children's health.

Background information and further evidence are attached to this letter. We would welcome the opportunity to discuss our submission further. [REDACTED]

Kind regards



Dr Sandro Demaio
Chief Executive Officer

Background information: Enabling children to travel on buses free from unhealthy food and drink marketing

The impact of unhealthy food and drink marketing on children

Overweight and obesity is driving death and disease in Australia, and many children are at risk

- Unhealthy diets, overweight and obesity are the second greatest risk factors for the disease burden in Australia after tobacco smoking.⁶
- One in four Victorian children are now overweight or obese and face an increased lifetime risk of disease and early death.⁷
- There are significant inequities in rates of overweight and obesity:⁸
 - Children and young people living in low socioeconomic areas are more than twice as likely to be above a healthy weight than those from the highest socioeconomic areas (11% vs 4.4%).
 - Children living in regional and remote areas are more likely to be above a healthy weight compared to children in major cities (29% vs 23%).
 - Aboriginal and Torres Strait Islander children aged 10–14 years are more likely to be above a healthy weight than non-Indigenous children (37% vs 27%).
- Children that are above a healthy weight are more likely to become overweight or obese as adults, increasing the risk of non-communicable diseases including many cancers, cardiovascular disease and type 2 diabetes, with early warning signs, such as pre-hypertension, sometimes appearing in childhood.⁹
- In addition, children that are above a healthy weight are more likely to experience poor self-esteem and poor mental health.¹⁰
- In Australia, estimated productivity losses due to obesity are up to \$14.9 billion annually¹¹, with medical costs associated with overweight and obesity among 6 to 13-year-olds estimated at \$3 million annually.¹²

Children and families are bombarded with advertising for unhealthy food and drinks on public transport

- Obesity has come about as a response to a modern food environment, where people are overwhelmed by the extensive, sophisticated and persuasive marketing techniques used by the unhealthy food and drink industry.
- In 2019, 61% of food and drink advertisements found on Melbourne's public transport network (displayed in and around train stations, tram stops, bus stops and near schools) were found to promote unhealthy food and drinks.¹³

There needs to be a strong government and parliament-led policy response

- The current *Victorian Public Health and Wellbeing Plan 2019–2023* has a stated objective to decrease Victorians' exposure to marketing of unhealthy food and drinks and increase exposure to marketing of healthier food and drinks.
- This includes an ambitious goal of reducing obesity over the period to 2025.¹⁴ Current trends indicate that Victoria will not meet this target.
- Overweight and obesity requires a combination of approaches, and a critically important part of this is addressing marketing of unhealthy food. Ensuring public transport, including school buses, are free from unhealthy food and drink marketing is one element that will help bridge this gap and improve Victorians' health and wellbeing.

- There is strong community support for restrictions on unhealthy food marketing, with 79% of Australian adults agreeing that government should intervene to protect children from unhealthy food marketing in areas such as bus stops and train stations.¹⁵

What can the Victorian Parliament do and how?

To ensure policy change has the greatest impact, VicHealth recommends that policies to restrict unhealthy food and drink marketing on buses have the following components:

1. Mandatory regulation

Mandatory regulation creates a level playing field for businesses and removes any possibility of a company attempting to gain market advantage through non-compliance. The Obesity Policy Coalition's report [Overbranded, Underprotected](#) and further research show that voluntary regulation or industry-led self-regulation have limited impact on reducing children and young people's exposure from unhealthy food marketing.^{16,17} Research in Australia has found that the frequency of food advertising and children's exposure to unhealthy food marketing remained unchanged despite the implementation of industry self-regulatory pledges.¹⁸

The Victorian Government Healthy Choices guidelines should underlie the development of policies to restrict unhealthy food and drink marketing in Victoria. These guidelines align with the Australian Dietary Guidelines and are already widely used across Victorian settings including hospitals, health services and workplaces to help ensure that healthy food and drinks are offered and promoted.

2. Application to brands commonly associated with unhealthy foods

It is important that marketing of brands commonly associated with unhealthy foods, for example quick service restaurants or sugary drinks, are also included within scope of marketing restrictions, even when promoting 'healthy options' or their brand alone. There is substantial evidence demonstrating that even when an unhealthy brand promotes a healthy product, children are more likely to choose and consume unhealthy food and drinks because of reward pathways in the brain and brand association.^{19,20}

References

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