



AUSTRALIAN DENTAL
ASSOCIATION INC.

**SUBMISSION TO THE AUSTRALIAN
ASSOCIATION OF NATIONAL ADVERTISERS**

‘AANA Code for Advertising to Children’

1 June 2007

**Authorised by
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Federal President**

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Introduction

The Australian Dental Association Inc (ADA Inc) is pleased to respond to the Australian Association of National Advertisers' review of its Code For Advertising To Children.

The ADA is the national peak body representing dentists in Australia. It is an organisation of over 10,000 members which has as its main aims the encouragement of the oral health of the public and the promotion of the art and science of dentistry.

The ADA Inc has a commitment to the delivery of oral health care for children.¹

In view of our commitment to dental health promotion the focus of this submission will be on the impact of advertising to children in so far as it will impact on children's dental health.

General comments

It is acknowledged that the Coalition on Food Advertising to Children (CFAC), of which ADA is a member, has made a submission to this review which is endorsed by ADA Inc.

The ADA is pleased to support CFAC's push to ban the advertising of junk foods during children's television viewing times in a bid to improve the dietary habits of Australian children.

ADA Inc supports the regulation of television food advertising during children's viewing times as evidence suggests there are strong links between advertising, poor diet and obesity. The impact of poor diet and its relationship to dental health is of primary concern to the ADA.

Television food advertising

Australian studies show that children view an average 23 hours of television per week with four hours of this time spent watching advertisements. It is estimated that food advertisements account for 30% of all advertisements during children's hours. Television advertisements largely feature food products that are high in fat, salt and sugar, and low in fibre.² Over consumption of these foods can lead to both general and oral health problems.

Developmentally, young children are unable to discern the persuasive messages of advertising and tend to accept statements made in advertising as being true. The amount of time children spend watching television correlates with their request, parental purchase and child consumption of those foods advertised on television.³

¹ ADA Policy Statement 1.3.1

² Zuppa, J., Morton, H. and Mehta, K. (2003) 'Television food advertising: Counterproductive to children's health? A content analysis using the Australian Guide to Health Eating', *Nutrition and Dietetics*, Vol. 60, No. 2: 78-84.

³ Ibid.

Childhood dental decay

At the same time that obesity levels are rising, there are signs that the incidence of childhood dental decay is increasing. The ADA considers there is a clear link between the increased consumption of the type of foods advertised during children's viewing hours and the increase in childhood decay. Decay across children of all age groups increased during the period from 1996-1999, reversing the trend which saw a decline in rates of decay during 1991-1996. The trend since 1996 was most significant for five-year old children who experienced a 21.7% increase in decay during this period.⁴ The number of children hospitalised for dental treatment has also risen. These facts are disturbing as decayed teeth can cause infection and other dental problems later in life.

Australia's National Health and Medical Research Council's dietary guidelines for children and adolescents argue that "historically the prevalence of dental decay has increased when the diet has changed to include more sugars and other sweetened products".⁵ Dental decay has been estimated to be Australia's most expensive diet-related disease.⁶

Soft Drinks and Sports Drinks

According to the National Health and Medical Research Council carbonated drinks and sports drinks are likely to exacerbate dental erosion (Dietary Guidelines for Children and Adolescents in Australia).

A 600ml bottle of soft drink can contain the equivalent of up to 13 teaspoons of sugar, as well as high acid levels – both of which can potentially damage teeth. Some also have caffeine which can dry the mouth by reducing the flow of saliva and do damage to teeth. The frequent consumption of soft drinks is particularly bad for children's oral health and can lead to tooth erosion and contribute to other health problems such as Type 2 diabetes and obesity.

Additionally, so-called sports drinks have a high sugar content and are quite acidic which is a recipe for dental erosion. This is particularly the case if used in conjunction with heavy exertion. Studies into regular consumption of sports drinks show that they may lead to dental decay and/or dental erosion because their acid levels have been linked to harming the tooth enamel. According to the University of Sydney's NSW Centre for Overweight and Obesity, the consumption of sports drinks was also contributing to the growing childhood obesity problem.⁷

A study published in a 1997 issue of the British Journal of Sports Medicine found eight brands of sports drinks showed pH levels ranged from 4.46 to 2.38. A low pH level means a beverage is acidic and the lower the pH the more acidic the product. Damage can start to occur when the pH drops below 5.5. Acids can gradually erode enamel

⁴ Armfield, JM., Roberts-Thompson, KF. and Spencer, AJ. (2003) *The Child Dental Health Survey, Australia 1999: Trends Across the 1990s*, AIHW Cat. No. DEN 95, The University of Adelaide, AIHW, Dental Statistics and Research Series No. 27, p. 27.

⁵ NHMRC (2003) *Dietary Conditions for Children and Adolescents in Australia Incorporating the Infant Feeding Guidelines for Health Workers*, National Health and Medical Research Council, Endorsed 10 April, p. 205.

⁶ Crowley, S., Antioch, K., Carter, R., Waters, A-M., Conway, L. and Mathers C (1992) cited in NHMRC (2003) *Dietary Conditions for Children and Adolescents in Australia Incorporating the Infant Feeding Guidelines for Health Workers*, National Health and Medical Research Council, Endorsed 10 April.

⁷ Burke, K., (2007) *Experts pour cold water on Gatorade*, 3 May at www.smh.com.au

from teeth leading to loss of the tooth's natural shape, or premature exposure of the dentine, which can make a tooth sensitive – especially when exposed to heat and cold.

In early May this year, the ADA expressed great concern over Gatorade's Australian launch of its 'world first' sports drink specifically targeting children under 13 – 'the tween market'. The pressure maintained by the ADA and other health authorities on the negative consequences of Gatorade on children's health resulted in the organisation removing their smaller 200 ml packs off the supermarket shelves.

Recommendations

ADA Inc supports the conclusions and recommendations made by CFAC specifically in relation to:

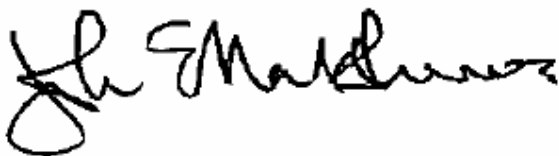
- Definitions;
- Parental Authority;
- Food and Beverages;
- Enforcement of the Code.

The point ADA Inc wishes to make is that 90 % of all dental disease is preventable. Clearly the advertisements of products are designed to improve sales. Restrictions on food and beverage advertising to children will reduce consumption in products high in fat, salt and sugar; and will therefore reduce the propensity for dental disease to occur.

Other matters

The ADA recognises that the Australian Communications and Media Authority (ACMA) have announced a comprehensive review of the Children's Television Standards for the first half of 2007. It would seem more practical for the AANA to wait for the outcome and advice from that review before undertaking any changes to this self-regulatory code. The AANA would be better informed by the outcomes of the ACMA review and therefore would be in a better position to make meaningful contributions to protect children from the negative impacts of food and beverage advertising. The current codes are simply not effective in this respect.

Thank you for the opportunity to make a submission in respect of this review.



Dr J E Matthews
Federal President