

Nutrition marketing and public policy

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22.1 Introduction

Since the Nutrition and Plan of Action on Nutrition in 1992, the idea that government policy should be focused more explicitly on common complications of nutrition policies has included promoting and optimizing wellness of the aging population and change in the disease spectrum to include all population groups (Gao et al., 2020). In addition, sustainable development goals target to end hunger and achieve food and nutrition security by 2030 (Liverpool-Tasie et al., 2020). The 1950s were a turning point and started transforming and reorienting our food systems and societies dramatically by accelerating and triggering mass production and overconsumption in the food and nutrition systems as of the 1970s throughout the world (Tekiner, 2020). The people, institutions, environments, infrastructure, production, processing, distribution, marketing, sale, preparation, and consumption activities shape the diet, and all are intrinsically related to health, environment, culture, politics, and economy (Fanzo et al., 2020). These challenges exhibit that nutrition and health are interconnected and complicated, and policymaking is extremely sensitive to these challenges.

The food industry has created a broad range of food preferences for people worldwide to reach tasty, convenient, inexpensive, and safe foods, and consumed them in large quantities (Chandon & Wansink, 2012). The global food system has dramatically produced more processed, affordable, and effectively marketed food than ever before. However, this leads to health-related problems, such as obesity, cardiovascular disease, and cancer (Swinburn et al., 2011). So basically, food marketers have been accused of becoming a part of the growing health problems. At least that's what people believe. To date, consumer behaviors, including dietary choices, are shifting worldwide from scarce, plant-based, fresh, and unprocessed foods to highly processed foods high in sugar, fat, and animal-origin products. This situation, also called "nutrition transition," shapes the increasing Global demand for food and leads to a relative shift in public health challenges from undernutrition-related diseases and disorders to overconsumption-related conditions (Bodirsky et al., 2020). As seen obviously, these challenges are expected to have substantial effects on public health and policies. Thus integration of nutrition transition impacts and responsive measures into public policy is encouraged by international, governmental, and nongovernmental parties.

Nutrition marketing is any marketing activity on TV, radio, social media platforms, or food labels of food and beverages that cover more than the minimum requirements of health or nutrition information (Colby et al., 2010). The marketing research has successfully used the contextual characteristics of food products such as packaging and portion sizes, design, salience, health claims, and labeling, strongly influencing food preferences and consumption in ways the consumers usually lack insight into (Cohen & Babey, 2012). Here, we cannot rule out that nutrition marketing believes that "reaching new consumers is more difficult than raising loyalty." Professor Rosemary Stanton considers this situation an "obesogenic environment" and claims that people are regularly bombarded with food choices that encourage them to move less and eat more (Stanton, 2015). There is little doubt among the researchers that marketing plays a pivotal role in the contextual influences of particular foods and beverages on public health.

Thus, to reach nutritional and health requirements, many countries have started taking preventive action, such as a health claims on products high in saturated fat, sodium, and sugar. It seems that recent developments in nutrition and health claims will possibly affect the future of producing and marketing foodstuffs (Colby et al., 2010; Smarta & Ghosh, 2020). Furthermore, this applies also to the use of digital platforms for marketing healthy eating, where the scale

of marketing that promotes unhealthy food items is not recognized (Schiro et al., 2020). Therefore, social marketing thinking and strategies are now located at the top of health improvement strategies in some countries. For instance, social marketing is increasingly advocated as the primary public health strategy for influencing lifestyle behaviors in the USA. It is recognized in the White Paper on Public Health in the UK to build public awareness and change behavior. In addition, there have been several social marketing campaigns and projects, including the Change4Life campaign in the UK (Gracia-Marco et al., 2010), the food labeling to advance better education for life in the European Union (EU) (Storcksdieck Genannt Bonsmann et al., 2010), the supplemental nutrition assistance program in the USA (Moran et al., 2018), the European Institute of Innovation and Technology Food (European Cluster Collaboration Platform, 2019), the nutriscore front-of-pack label system in Belgium (Vandevijvere et al., 2020), and the food systems dashboard (FSD) in the USA (Fanzo et al., 2020). Overall, nutrition marketing is multi-dimensionally linked to public policy. Strong evidence indicates the necessity of synergic, comprehensive, and multi-component policies, including limiting unhealthy food and beverage marketing by regulation, taxes, subsidies, elimination, and trade agreements, to improve nutrition and thus prevent noncommunicable diseases Hyseni et al. (2016) pointed out.

Accordingly, the objective of this chapter is to discuss how nutrition marketing is associated with public policy.

22.2 Considering nutrition marketing

Marketing is a crucial factor and ingredient in customer choices related to food consumption. The leading brands such as Anheuser-Busch, Nestlé, PepsiCo, and others, the world's largest food and beverage companies in 2017, play a crucial role in having dominant positions in the markets (Martinho, 2020).

Global look-a-likes of favorite foods, prep-less meals, and a new pseudo-vegan lifestyle are among the megatrends reorienting the global food industry. For example, Global sales of packaged foods and drinks were \$2.1 trillion in 2017 and are estimated to increase at a growth rate of 2.2% through 2022. Healthy foods and beverages, with sales of \$275.6 billion in 2018, and fortified/functional fare with \$261.6 billion, remain the world's largest healthy food category. Consumer-interest-frequencies have followed the low-sugar regimen, calorie-restricted, low/no carbs, high-protein, halal, vegetarian, high-fat, intermittent fasting, gluten-free, pescatarian, dairy-free, raw food, vegan, grain-free, and kosher were ranged between 19% and 2%. The highest score belonged to a low-sugar regimen with 19%, and the lowest was kosher with 2%. Weight management markets are growing the fastest in the Asia Pacific and Latin America. Four hundred twenty-five million people globally had diabetes. Forty-two percent of Brazilians would buy foods and beverages that help them lower their stress (Barbalova, 2019; Euromonitor, 2019; Mintel, 2019a; Sloan, 2019). It is hard not to be impressed by these practical corporate actions, likely considering consumer needs and society.

Many major factors are influencing food choices, such as price, new trends, health, sustainability, social and cultural attitudes, sociodemographic and behavioral characteristics, and labeling and packaging. For instance, specialty foods and drinks are the third fastest-growing luxury category worldwide, after electronics and cars. The global specialty foods market is expected to grow from \$138.79 billion in 2020 to \$161.52 billion in 2021 at a compound annual growth rate of 16.4%. (Business Wire, 2021). The trend is due to the growing awareness of health and environmental concerns and the need for sustainability in how goods are produced and used. Global consumers also look for new products and solutions driving the growth of health and wellness, such as the prevention of stress and anxiety, mild vision impairment, mental development, and gut health (Sloan, 2019; Tekiner, 2020). Similarly, around the world, specific health claims have been advocated for nutrition marketing, aiming to help consumers to better inform and educate themselves about their food choices. For example, the use of prebiotics such as yeast beta-glucan to modulate the microbiome was central for the Asia Pacific market including India, China, and Japan where new products with gut health claims were launched. The global probiotic market is constantly growing there and is expected to reach \$31.67 billion or 46 percent of the global market (Asia Pacific Food Industry, 2020). The interest is due to the growing public awareness of linking the gut microbiota to the development of autoimmune, cognitive, and metabolic disorders such as obesity, type 2 diabetes, nonalcoholic liver disease, cardio-metabolic diseases, and malnutrition (Fan & Pedersen, 2021). With research increasingly linking the microbiome to various benefits (e.g., mental health and skin), attention to probiotics, prebiotics, symbiotics, and fiber expect to raise (Mintel, 2019b). Another aspect of increasing interest is the search for information about production methods and components of food products. To satisfy consumers' demands the food industry has created a new phenomenon, often referred to as a "clean label," referring to a conceptual design of commercial food contents with natural, familiar, simple, and easily recognizable ingredients, with no artificial ingredients or synthetic chemicals. Targeting consumers to view their products as healthy and free from artificial additives (E numbers) or preservatives, the food industry is gradually adopting clean labels as a standard (Kajzer & Diowski, 2021; Maruyama et al., 2021). There is a need as consumers have perceived some production methods as less "natural"

(i.e., conventional agriculture) and considered some food components as “unhealthy” and “unfamiliar” (i.e., artificial additives) (Asioli et al., 2017). As Michael Pollan in his book “In Defence of Food” (2008) argued consumers instead of food, are ingesting “edible foodlike substances,” which are no longer the products of nature but of food science. Pollan (2008) suggested we should not “eat anything with more than five ingredients, or ingredients you can’t pronounce.” In this case, policymakers have faced a new challenge of understanding, identifying, and applying the term clean label and decreasing consumer misconceptions. That is a clear sign that nutrition marketing is linked to public policy.

Marketing is a “determinant ingredient in the choices related to food consumption” (Martinho, 2020). According to Martinho (2020), more prominent companies are using adjusted food image, and name approaches, interrelated with the label, packaging, and brand, for a successful marketing strategy through the media to promote unhealthy food, especially for children and adolescents. Similar strategies were used to promote unhealthy products to vulnerable populations in a time of increased stress and hardship such as COVID-19. Marketing through social media as the most accessible and entertaining medium during COVID-19 became a platform for unhealthy foods and beverage marketing due to a lack of regulation and low levels of monitoring (Gerritsen et al., 2021).

Good food quality, including clean-label foods with simple and minimalistic ingredient lists (Maruyama et al., 2021), and other special healthy attributes, as well as sustainability aspects, are recent emergent dimensions of interest to consumers. Nutrition marketing strategies have relevant implications on human health, and this framework deserves special attention, particularly in designing more realistic and standardized policies across countries through negotiations (Martinho, 2020). Consumer-brand relationships are significant because customers choose the brands that satisfy their deepest needs (Gómez-Suárez et al., 2017). The industry employs nutrition and health claims to satisfy consumers, reporting critical nutrients, energy density, sugar, saturated fat, and sodium content. Often these are connected to special premium offers and promotional characters used to encourage and motivate consumers and especially young children to believe in their healthiness, often leading to overconsumption of ultra-processed unhealthy foods with their correspondingly high intake of added sugars, saturated fats, trans fat, sodium, and calories (Gamboa-Gamboa et al., 2019; Griffith & Nevo, 2019). To summarize the significance of this fact, we can say that brand love and customer engagement are significant determinants for the success of public policy, which should be considered. Let’s remember what Gussow said in an interview in 1991: “Eating healthy is neither complicated, nor time-consuming, nor punishing. And we don’t need any more new products to do it.” (Gussow, 1991).

All these development forced various international jurisdictions, including the EU (EFSA Panel on Dietetic Products, 2011), USA (US Food & Drug Administration, 2009), Canada (Health Canada, 2009), and Australia and New Zealand (Food Standards Australia New Zealand, 2013), to release guidance framework documents for the preparation of a food health claim application (Jones & Jew, 2016). From Brian Wansink’s point, a true challenge in nutrition marketing is in place between leveraging new tools of consumer psychology and conducting lessons from other products’ failures and successes. Therefore, disseminated nutrition information may motivate consumers to modify their behaviors, and the remaining actors, such as academics, scholars, legislators, food marketers, and nutrition professionals, increase their awareness of effective nutrition marketing (Burns, 2006).

There are many indicators that consumers are making poor food choices from a nutritional perspective. Thus, it remains poor interrelation between nutrition marketing, lessons from marketing nutrition, lessons for marketing nutrition, and public policy. To clarify this missing linkage, we will further explore the public policy on nutrition and health and what it is trying to achieve in the next section.

22.3 Public policy facts on marketing strategies

We think that we have to establish complex connections between public authorities and nutrition marketing strategies. For instance, junk food advertisers in the UK spend nearly 30 times what the government spends promoting healthy eating. Marketing for fruit and vegetables represents just 2.5% of the UK’s annual food advertising spend. Therefore, it is essential not to expect public authorities to enter a marketing battle against commercial actors to judge if a public health campaign is successful (Schiro et al., 2020). The literature shows that commitments in industry self-regulation schemes tend to be relatively vague and permissive, and the measurable effects of self-regulation tend to be relatively small. Some extent of public regulation may catalyze the effectiveness of industry self-regulation (Ronit & Jensen, 2014). From the public authority’s perspective, pricing policies would be recommended to correct the differential in cost between healthy and current diets. Governments can implement dietary guidelines to shape policies and promote healthy diets. For example, tax policies can discourage eating unhealthy foods like soda and highly processed, packaged foods (Imamura et al., 2015). For instance, in 2016, Belgium introduced a small excise duty (around \$0.07/L) on all

soft drinks, including nonalcoholic beverages and water containing added sugar or other sweeteners or flavors for economic rather than health reasons.

Similarly, in other countries, higher taxes on sugary drinks or junk food, introduced for health reasons, have significantly impacted purchases and had more significant impacts on lower-income groups (Vandevijvere et al., 2020). Another analysis revealed that the consumers in all 27 EU Member States and Turkey value nutrition information on food packs, which might drive manufacturers to provide such information voluntarily to create a marketing advantage. On average, 85% of the examined products contain back-of-pack nutrition information (70% in Slovenia and 97% in Ireland). In contrast, it was 48% for front-of-pack details (for example, 24% in Turkey and 82% in the UK). Guideline daily amounts labeling was the most prevalent form of front-of-pack information, showing an average penetration of 25% (Storcksdieck Genannt Bonsmann et al., 2010).

Global diet quality varies substantially by age, sex, and national income, and reasonably independent heterogeneity is evident in diet patterns. Increases in unhealthy habits are outpacing increases in healthy ways in most world regions. Given the disease burdens associated with suboptimum diet quality, these findings emphasize the need to implement policies to improve diet quality worldwide (Imamura et al., 2015). Based on these facts, we need to mention a project called the FSD, derived by the global alliance for improved nutrition and Johns Hopkins University. It includes over 150 indicators that measure components, drivers, and outcomes of food systems at the country level. It also identifies and prioritizes ways to improve diets and nutrition in their food systems sustainably.

According to the FSD, the world is divided into five categories in terms of food system types:

1. Rural and traditional
2. Informal and expanding
3. Emerging and diversifying
4. Modernizing and formalizing
5. Industrialized and consolidated, respectively

In the first rural and traditional food system, a significant proportion of included countries have adopted mandatory or voluntary fortification guidelines for staple foods to combat micronutrient deficiencies; in informal and expanding food systems, processed and packaged foods are available in both urban and rural areas. Some food quality standards are in place, and advertising is not regulated. However, many countries have fortification guidelines for staple foods (United Nations Children's Fund (UNICEF), 2021). In emerging and diversifying food systems, processed foods, including ultra-processed foods, are common in urban areas and also found in many rural areas (Gamboa-Gamboa et al., 2019). Food safety and quality standards exist with limited government monitoring capacity, and a more significant proportion of the included countries have adopted food-based dietary guidelines; in modernizing and formalizing food systems, food and beverage manufacturing represent a smaller percentage of overall manufacturing, and dietary energy is derived from diverse food sources, government regulation and monitoring of food safety and quality standards are more common, and most recently, aggressive food labeling is emerging for ultra-processed foods; and finally in industrialized and consolidated food systems, farming is a small proportion of the economy, supply chains are long, with national and international sourcing of nearly all types of foods, a more significant proportion of countries in this type of system have adopted policies that ban the use of industrial trans fats and encourage the reformulation of processed foods to reduce salt intake.

The following part presents some food-related policies around the world related to (1) taxes on sugar-sweetened beverages, (2) availability of food-based dietary guidelines, (3) existence of any policies on the marketing of junk foods to children, (4) existence of any policies on mandatory nutrition labeling, (5) prevalence of nourishment, (6) prevalence of moderate or severe food insecurity, (7) noncommunicable disease mortality rate, including the probability of dying between 30–70 years from cardiovascular disease, cancer, diabetes, and chronic respiratory disease, (8) Urban population and (9) literacy rate in adult (ages 15 + years) (Food Systems, 2020; Thow & Nisbett, 2019; Walls et al., 2019; Food and Agriculture Organization of the United Nations (FAO), 2019; Food and Agriculture Organization of the United Nations (FAO) and World Health Organization (WHO), 2019; International Food Policy Research Institute (IFPRI), 2019; United Nations Department of Economic and Social Affairs, 2018; World Health Organization (WHO), 2018; World Health Organization (WHO), 2019; World Health Organization (WHO), 2021a). These are to address the consumers exposed to the powerful and prevalent food marketing that undermines healthy diets and negatively shapes food preferences and values.

- Implementation of fiscal and pricing policies to promote healthy diets. Most identified evidence is related to the taxation of sugar-sweetened beverages. Taxes on sugar-sweetened beverages are implemented in the following

countries in terms of food systems type: India in 2017 in the rural and traditional category, Thailand in 2017, the Philippines in 2018, Morocco in 2019 in the informal and expanding category: Mexico in 2014, South Africa since 2017, and Peru since 2018 in emerging and diversifying category, Chile since 2014, Saudi Arabia since 2017, Ireland since 2017, Portugal since 2017, and Malaysia since 2019 in modernizing and formalizing category, and Norway since 1981, France since 2012, Finland since 2014, and the UK since 2017 in an industrialized and consolidated category, respectively.

- Food-based dietary guidelines are available in Venezuela in 1991, Thailand in 1998, Greece in 1999, Nigeria in 2001, Croatia in 2002, Portugal and Italy in 2003, Hungary in 2004, Romania and Bulgaria in 2006, Canada in 2007, Spain in 2008, Oman since 2009, Mongolia, Malaysia, Poland, and Japan since 2010, France since 2011, Philippines, South Africa, and Ireland since 2012, Bolivia, Chile, Australia and Germany since 2013, Brazil, Turkey, and Indonesia since 2014, Afghanistan, Argentina, Mexico and Austria since 2015, China, USA and UK since 2016, India, Belgium, and Kenya since 2017, and Peru since 2019, respectively.
- Implementation of policies to protect children and restrict food marketing's harmful impact on them. Marketing policy linked to advertising junk foods to children is in place in countries like India, Pakistan, Afghanistan, Madagascar, Tanzania, Kenya, Mali, Chad, Niger, Mozambique, Ethiopia, Bolivia, Honduras, Nicaragua, Morocco, Egypt, Sudan, Iraq, Azerbaijan, Uzbekistan, Thailand, Vietnam, Indonesia, Philippines, Georgia and Mauritania, Mexico, Peru, Algeria, Romania, Serbia, Croatia, China, Mongolia, Turkmenistan, South Africa, Gabon, Brazil, Colombia, Chile, Venezuela, Turkey, Portugal, Ireland, Russian Federation, Saudi Arabia, Ukraine, Malaysia, Korea, Oman, Greece, Poland, the Baltics, United Arab Emirates, Kuwait, Canada, USA, Argentina, Uruguay, Australia, Spain, France, Germany, Greece, Italy, UK, Norway, Sweden, Finland, Israel, Iceland, Czech Republic, Netherlands, Belgium, and Denmark.
- Policy on mandatory nutrition labeling is available in Mexico since 1999, Canada and Korea since 2003, Paraguay since 2004, China and Malaysia since 2010, Indonesia, Colombia, New Zealand, and India since 2011, Chile, Iceland, Algeria, Oman, Saudi Arabia, and Australia since 2013, Philippines and Russian Federation since 2014, USA, EU and UK, Uzbekistan and Thailand since 2016, and Turkey since 2017, respectively.
- The prevalence of nourishment, a three-year weighted average between 2016 and 2018 is presented as 18% in rural and traditional food systems (e.g., 15% in India, 20% in Pakistan, 30% in Afghanistan, 39% in Yemen, 44% in Madagascar, and 47% in Zambia), 12% in informal and expanding food system (e.g., 17% in Bolivia, 3.4% in Morocco, 4.5% in Egypt, 20% in Sudan, and 8.3% in Indonesia), 7.9% in emerging and diversifying food system (e.g., 3.6% in Mexico, 6.2% in South Africa, 9.7% in Peru, 8.5% in China, 2.5% in Romania, and 5.7% in Serbia), 3.9% in modernizing and formalizing food system (e.g., 2.5% in Brazil, 21% in Venezuela, 7.1% in Saudi Arabia, 3.6% in Bulgaria, 12% in Jordan, 11% in Lebanon, 2.5% in Russian Federation, and 2.5% in Malaysia), and finally 2.6% in industrialized and consolidated food system (e.g., 2.5% in Canada, USA, the EU countries, Uruguay, Australia and Japan, and 4.6% in Argentina), respectively.
- The prevalence of moderate or severe food insecurity in the food system types is given as 51% in the rural and traditional category, 26% in the informal and expanding category, 13% in the emerging and diversifying category, 7.5% in modernizing and formalizing category, and 8.2% in industrialized and consolidated category, respectively.
- Yearly, there is a huge noncommunicable disease dead toll. More than 15 million people die between the ages of 30 and 69 years. 85% of these early-age deaths occur in low- and middle-income countries (WHO, 2021b). The noncommunicable disease mortality rate (per 100,000 population) based on 2016 data is 610 in the rural and traditional segment, 689 in the informal and expanding segment, 540 in the emerging and diversifying segment, 510 in modernizing and formalizing segment, and 351 in the industrialized and consolidated segment, respectively.
- On the other hand, the percent probability of dying between 30–70 years from cardiovascular disease, cancer, diabetes, and chronic respiratory disease based on 2016 is given as 23% in the rural and traditional category, 23% in the informal and expanding category, 17% in emerging and diversifying category, 18% in modernizing and formalizing category, and 12% in industrialized and consolidated category, respectively.
- The percent urban population of the total population based on 2018 is distributed as 33% in rural and traditional systems, 49% in informal and expanding systems, 62% in emerging and diversifying systems, 79% in modernizing and formalizing systems, and 83% in industrialized and consolidated system, respectively.
- Finally, the literacy rate, for adults (ages 15 + years) based 2018 is 73% in the rural and traditional group, 79% in the informal and expanding group, 96% in the emerging and diversifying group, 96% in modernizing and formalizing group, and 99% in industrialized and consolidated group, respectively.

However, indicators or data around consumer behavior in the acquisition, preparation, meal practices, and storage is limited (Food Systems, 2020). On the other hand, only in the United States, there are thirteen plus campaigns conducted between 1990 and 2016, such as “Five A Day for Better Health, Fruits & Veggies-More Matters, Eat ‘Em Like Junk Food, Cans Get You Cooking, Fruits & Veggies (FNV), Just Ask for Whole Grains, Energy for the Good Life, The Perfectly Powerful Peanut, Got Milk?, Milk Life, 1% or Less, Drink Up,” and “Meatless Monday.” Interestingly, most of the campaigns received support from the food or beverage industry or commodity groups ($n = 13$) and NGOs ($n = 7$). Four campaigns (i.e., Energy for the Good Life, The Perfectly Powerful Peanut, Got Milk?, and Milk Life) were supported by government-authorized, industry-funded checkoff research and programs (Englund et al., 2020).

The facts pooled from the FDS and other authorities, the diverse activities carried out in public health nutrition and food systems, and government policies need reliable data (Egan et al., 2007). Governmental actors also play significant roles in improving nutrition and health through developing policies, and national action plans for nutrition, providing funding and support, and monitoring projections for government accountability. Among these responsibilities, lobby/advocacy for food and nutrition action plans is the prioritized strategy in the short term (Pavlovic et al., 2009; Pavlovic, Pepping, et al., 2009). Based on the fact that evidence-informed government nutrition policies can reduce the risk of diseases. The governments must increase and support health literacy through National Health Literacy Demonstration Projects to speed progress in preventing and controlling noncommunicable diseases (WHO, 2017). The countries would establish effective nutrition marketing surveillance systems to overcome nutritional health issues to monitor public health and nutrition epidemiology.

22.4 Concluding remarks

In this chapter, we have sought to respond to the questions related to nutrition marketing and public policy. From this chapter, the following conclusions can be drawn:

- Nutrition marketing strategies are crucial due to influencing the customers’ food preferences. Therefore, the public policies should be designed to protect the consumers from aggressive and unhealthy nutrition marketing approaches,
- The coexistence of hunger and malnutrition characterizes the world in the twenty-first century. Almost 800 million people in the world suffer from a lack of adequate foodborne energy and more than 2 billion experience micronutrient malnutrition. Therefore, the food and beverage companies and governments, as well as international authorities, should raise a challenging question: “how do we accomplish nutritional and health needs while also addressing Global macro-issues?”
- Nutrition marketing tools and platforms should be well-oriented for the promotion of healthy dietary choices,
- Bigger actors in the food sector companies should always be beneficial to public policy,
- Collaboration between the food sector, trade organizations, and legal authorities should be strengthened accordingly,
- Negative impacts of nutrition marketing on preventable diet-related noncommunicable diseases and consumption of much healthier foods throughout life can be achieved by “regulated commodities” based on “national and international legislations,”
- The nutritional value of a food is linked to environmental conditions, and the environmental performance of different products varies with dietary context. Thus, nutrition marketing and public policymakers should be aware of these facts,
- Academics and nutritionists should justify and explain the multidimensional impacts of nutrition marketing on public policy by getting themselves “a little attitude,”
- Sustainable approaches in nutrition marketing to enhance positive nutrition behavior can help build healthy societies,
- A monitoring network should be established to survey nutrition marketing activities, stakeholders, about suggestions for designing new and efficient policies and regulations,
- Policymakers should take appropriate measures in national governance systems that encourage the promotion of correct nutrition marketing at both regional and global levels,
- The food sector exhibits discrepancies between concern and practice-based actions regarding consumer choices. Therefore, improper nutrition marketing connecting poor food choices, even based on a health claim, to public policy should be considered a risk factor and ethical issue.

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