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<td><strong>Author(s)</strong></td>
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Food marketing in Irish schools
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Abstract
Purpose – Schools are thought to represent a growing marketing opportunity for food advertisers in many countries. Marketing of unhealthy food to children is linked to the increased prevalence of obesity worldwide. This paper aims to explore ways in which schools respond to commercial activity around food marketing.

Design/methodology/approach – A census survey in the Republic of Ireland was employed to investigate the extent of commercial activity in post-primary schools in Ireland, with a focus on food marketing. School policies related to commercialism and promoting healthy living to children and respondents’ attitudes to these issues were explored.

Findings – Food sales are a prevalent form of commercial activity in schools with 81.4 per cent operating shops or canteens that sell snacks, 44.7 per cent drinks vending machines and 28.0 per cent snack vending machines. A total of 38 per cent of schools reported that they accept for-profit sponsorship and the primary reason was inadequate funding for equipment (91.6 per cent), especially sports equipment. The majority (87.3 per cent) agreed with establishing a national voluntary code of practice in relation to industry sponsorship, which is recommended by the Irish National Taskforce on Obesity. Few schools have policies that refer to commercial sponsorship (7.0 per cent), but schools would welcome receiving guidance and support in developing such policies.

Practical implications – The extent of commercial activity in schools and the possible effect on children and their families need to be disseminated widely. A mechanism for monitoring the type and volume of commercialism, and food marketing in particular, in schools in Ireland is necessary.

Originality/value – These findings provide a baseline to monitor the future direction of commercialism in Irish schools.

Keywords Schools, Food products, Obesity, Ireland, Marketing opportunities

Introduction
Childhood obesity is a major public health problem, particularly in the Western World. The consequences of childhood obesity are both short-term and long-term, and include bullying, low-self esteem, asthma, persistence of obesity into adulthood, CVD risk factors and social and economic disadvantage (Reilly et al., 2003). Currently it is suggested that more than 300,000 children are overweight or obese in Ireland and that rates are probably rising at a rate of 10,000 per year (Department of Health and Children, 2005a). More recent data from the Republic of Ireland show that 23 per cent of boys and 28 per cent of girls (aged 4-16 years) are overweight or obese (Whelton et al., 2007). Trend data illustrate an increase in prevalence, presenting a major public health problem for Ireland (O’Neill et al., 2007).

The authors would like to thank the school Principals and staff who took part in the survey. The survey was funded by the Irish Heart Foundation.
Changes in the social, economic and physical environment have resulted in increased availability of energy dense foods, a decrease in physical activity and a more sedentary lifestyle. The emergence of this obesogenic environment has been associated with the increasing prevalence of overweight and obesity world-wide (Doak et al., 2006; Swinburn and Egger, 2002). The marketing and advertising of energy-dense, micronutrient-poor foods and beverages to children has been identified as one of the many factors contributing to obesity in children (WHO, 2003). This paper focuses specifically on in-school marketing in Ireland and associated factors such as school food policies and attitudes to commercialism in schools. These issues are placed in context with the recommendations from the Irish National Taskforce on Obesity (Department of Health and Children, 2005a) and other relevant international work.

Television advertising, which is predominantly for foods high in salt, sugar and fat, has been shown to influence food choice, purchasing behaviour and consumption (Hastings et al., 2003). With respect to diet-related health, television advertising is associated with the adiposity of children and youth (McGinnis et al., 2006), prompting some countries (e.g. Australia) to conduct an updated and more comprehensive content analysis of television food advertising (Chapman et al., 2006a). However, food marketing is not confined to television advertising and can occur through other media such as magazines, radio, cinema, mobile phones and outdoor advertising. The effects of such media advertising on food choice and diet have not been systematically reviewed to date.

As well as numerous media, there are also a range of settings such as supermarkets (Chapman et al., 2006b) and schools through which children are exposed to food marketing. The school setting is thought to represent a growing marketing opportunity for food advertisers in many countries (Matthews, 2007; Hawkes, 2004). In the USA the Federal Trade Commission report to Congress on the 2006 expenditures and activities of 44 companies found that marketing in schools totaled 11 per cent ($186 million) of reported youth marketing and 90 per cent of that was for beverages, both carbonated and non-carbonated (Kovacic et al., 2008). Event sponsorship, token/voucher collection schemes, where tokens on confectionery products or via supermarkets are collected and redeemed by schools for educational or sporting equipment, and the placement of branded vending machines, are examples of some of the marketing techniques in place in schools. Guidelines or regulations on in-school marketing are currently not commonplace in many countries. Of the 73 countries reviewed by Hawkes (2004), 33 per cent were identified as having some form of regulation of this type and only a handful of countries place any restrictions on the sales of selected food products in schools. More recently, one of four policy options proposed by the WHO Forum on the Marketing of Food and Non-alcoholic Beverages to Children to reduce the promotion of energy-dense, nutrient-poor food involves prohibiting marketing of such food products to children at specified times and settings, including the school setting, which they propose should remain a commercial-free zone (WHO Forum and Technical Meeting, 2006). Consumer organisations have called for a WHO code that will set international standards on marketing of food and beverages to children to be implemented by national governments and food companies. This is in response to an investigation into food marketing in Asia Pacific where a wide disparity between countries in their approach to the marketing of food and beverages to children is reported (Robinson et al., 2008).
In Ireland, the National Taskforce on Obesity made a number of recommendations directly relevant to schools (Department of Health and Children, 2005a). These include:

- all schools should be encouraged to develop school polices to promote healthy lifestyles;
- a national, regularly reviewed code of practice in relation to industry sponsorship and funding of activities in schools and local communities be established; and
- the development of a clear code of practice in relation to the provision and content of vending machines in post-primary schools.

In Ireland, unlike other countries such as the UK for example, it is not mandatory to provide school meals, although funding is available through the school meals programme to disadvantaged schools that choose to avail of food services. Children can bring their lunch to school, purchase it at school or in a nearby shop or indeed may travel home at lunch time, depending on the individual school policy, facilities and location. In comparison to other countries, such as England (National Governors’ Association, 2007; Food Standards Agency, 2008) and Scotland (Scottish Executive, 2003; Lang et al., 2006) where considerable progress has been made in establishing, implementing and revising standards for food in schools and for school food policy, Ireland lags behind, primarily as a result of the differences in the school food environment. Food and nutrition guidelines are due to be launched shortly for post-primary schools in Ireland, and have been designed to act as a resource for training purposes and for the development of healthy school food policies.

The current use of policies to promote healthy living to children in schools as well as the extent of commercial involvement in schools in Ireland is unknown. This gap in the literature provided the impetus for this study. The aim of this study is two-fold, to document the extent and nature of marketing, in particular food marketing from for-profit organisations in post-primary schools in the Republic of Ireland and associated school level policy, and to explore attitudes towards commercial sponsorship in schools.

**Method**

A census survey of post-primary schools was undertaken based on a list of these schools from the Department of Education and Science web site (www.education.ie), which was based on the 2005 school year and included a total of 741 schools. The post-primary education sector in Ireland comprises Secondary, Vocational and Community and Comprehensive schools. Each category of school have different ownership and management structures but also have a great deal in common and are largely State funded, following the same State prescribed curriculum and the same State public examinations (www.education.ie). Schools were recruited via a letter to Principals and follow-up phone calls where necessary. Principals or staff involved with Social Personal and Health Education (SPHE) were invited to complete the questionnaire. Students were not invited to participate in this instance as the primary aim was to investigate school food policy and in-school food marketing rather than the food choices or dietary habits of school-going children.

A 40-item self-completion questionnaire was designed and piloted with ten schools, resulting in minor amendments. The majority of questions were closed-ended including sections on:
• school demographics;
• school food environment including the availability of specific foods and existence of healthy eating policies;
• involvement from for-profit organisations, including types of products sponsored and services offered to schools;
• respondents’ attitudes to sponsorship in schools, some of which were based on the work of Bennett and Gabriel (1999), approaches to change and recommendations from the National Taskforce on Obesity.

Questionnaires were returned in prepaid envelopes. Quantitative analyses were carried out using SPSS for Mac version 17.0. Tests of association including Chi square and Fisher’s exact probability tests were employed to investigate patterns in responses to questions on the school food environment, commercial sponsorship in schools and attitudes to sponsorship by respondent type (Principals and Vice-Principals, SPHE co-ordinators and teachers and other school staff) and school characteristics, including location (urban and rural), disadvantaged status (yes and no), school type (Secondary, Vocational and Community and Comprehensive), and student gender composition (boys only, girls only and co-educational). Null findings are not reported below.

**Results**

Of the 741 schools that were approached for participation, 331 participated, yielding a response rate of 44.7 per cent. All 26 counties in the Republic of Ireland were represented in the returned questionnaires. Just over half (52.7 per cent) of the schools were located in towns while almost one-quarter (24.1 per cent) were located in cities. Smaller numbers were located in villages (15.5 per cent) and in the countryside (7.6 per cent). The response rate from the various types of schools is representative of the proportion of these schools in the Republic of Ireland (see Table I). The vast majority of schools were State funded (93.3 per cent) with just under one-third (32.6 per cent) having disadvantaged status; overall 27.8 per cent of schools in Ireland are designated disadvantaged. Most of the schools were mixed gender (62.9 per cent) while smaller numbers were single sex schools (female only: 21.2 per cent, male only: 16.0 per cent). The gender composition of schools in Ireland generally is similar: mixed 64.6 per cent, female only 20.1 per cent and male only 15.2 per cent. In most cases the person completing the questionnaire was the Principal (64.5 per cent). Others who completed the questionnaire included SPHE co-ordinators (18.2 per cent), teachers (8.5 per cent), Deputy Principals (5.2 per cent), and other staff members (3.6 per cent).

<table>
<thead>
<tr>
<th>Type of school</th>
<th>Obtained sample (%)</th>
<th>Schools in Ireland (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary&lt;sup&gt;a&lt;/sup&gt;</td>
<td>52.9</td>
<td>54.8</td>
</tr>
<tr>
<td>Vocational&lt;sup&gt;b&lt;/sup&gt;</td>
<td>33.6</td>
<td>33.3</td>
</tr>
<tr>
<td>Community and comprehensive&lt;sup&gt;c&lt;/sup&gt;</td>
<td>13.4</td>
<td>11.9</td>
</tr>
</tbody>
</table>

**Notes:**

<sup>a</sup>Privately owned and managed, generally by religious communities;  
<sup>b</sup>State established and administered by Vocational Education Committees;  
<sup>c</sup>Managed by Boards of Management of differing compositions

Table I. Schools in Ireland and obtained sample, by school type
Food outlets
A majority of schools (81.4 per cent) reported having either a canteen (cafeteria within the school) or a tuck shop (shop selling snacks), and 24.9 per cent reported both. Just under half (44.7 per cent) reported having a drinks vending machine while just over one-quarter (28.0 per cent) reported having a snack vending machine. Nearly two-thirds (64.4 per cent) stated that there was a shop located close to the school while 44.4 per cent reported a fast food outlet nearby. Table II lists the types of food available in participating schools.

Healthy eating policies
Just over one-third of schools (36.0 per cent) reported having a “healthy eating” policy in place. The number of years the policy had been in place ranged from one to ten years (mean 2.33, SD 1.59).

The aim of all healthy eating policies was to increase consumption of healthy foods. Most (96.5 per cent) also aimed to educate students about food and nutrition and decrease the consumption of unhealthy foods. Fewer schools (89.5 per cent) aimed to improve food availability. Supporting teacher training in healthy eating and active living was a further aim of 70.5 per cent of schools. Fewer (13.4 per cent) reported that the healthy eating policy referred to commercial sponsorship from food and drinks companies.

Sponsorship from for-profit organisations
Policies that refer to commercial sponsorship were present in only 7.0 per cent of schools. Over one-third of schools (38.0 per cent) reported that their school currently accepts sponsorship. Inadequate funding for essential school equipment was the primary reason why schools reported that they accepted commercial sponsorship (91.6 per cent). Pieces of sports equipment (70.8 per cent) were the products most frequently sponsored. A substantial number also indicated sponsorship of IT equipment (48.1 per cent) and involvement in competitions and prizes (e.g. art and science, with branded prizes awarded to schools or class groups) (39.6 per cent). Lower percentages reported sponsorship of educational materials (19.5 per cent), vending machines (13.0 per cent) and science equipment (9.1 per cent).

In terms of services offered to schools, over a quarter (28.0 per cent) reported that information packs were offered to the schools by for-profit organisations while fewer reported being offered vouchers or token schemes (21.9 per cent), where for example provision of educational equipment or cash development grants are subject to collection of tokens via product purchasing. Approximately one-fifth of schools reported being offered the provision of business expertise (21.6 per cent), payments for advertising space (20.1 per cent), discounts on school equipment (19.8 per cent) and event sponsorship (19.1 per cent). Company employees helped with school activities in 14.9 per cent of schools. In terms of any change in sponsorship offered over the last five years, over half the respondents did not know if there had been a change (52.5 per cent), with a small number thinking it had increased (13.5 per cent) and a similar number (12.9 per cent) reported having accepted more sponsorship in the past five years.

The main reasons given for any perceived changes in sponsorship are illustrated below in Table III.
Table II.

<table>
<thead>
<tr>
<th>Product</th>
<th>Vending machine</th>
<th>Tuck shop</th>
<th>School canteen</th>
<th>Supplied free</th>
<th>Available in at least one outlet</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per cent</td>
<td>Number</td>
<td>Per cent</td>
<td>Number</td>
</tr>
<tr>
<td>Water</td>
<td>92</td>
<td>29.1</td>
<td>105</td>
<td>33.2</td>
<td>112</td>
</tr>
<tr>
<td>Juice</td>
<td>72</td>
<td>23.2</td>
<td>100</td>
<td>32.3</td>
<td>113</td>
</tr>
<tr>
<td>Confectionery</td>
<td>78</td>
<td>24.4</td>
<td>143</td>
<td>44.7</td>
<td>73</td>
</tr>
<tr>
<td>Sandwiches</td>
<td>20</td>
<td>6.5</td>
<td>71</td>
<td>23.2</td>
<td>149</td>
</tr>
<tr>
<td>Fruit</td>
<td>5</td>
<td>1.7</td>
<td>71</td>
<td>23.4</td>
<td>119</td>
</tr>
<tr>
<td>Salty snacks, crisps</td>
<td>43</td>
<td>14.1</td>
<td>107</td>
<td>5.2</td>
<td>53</td>
</tr>
<tr>
<td>Milk</td>
<td>2</td>
<td>0.7</td>
<td>49</td>
<td>16.9</td>
<td>109</td>
</tr>
<tr>
<td>Coffee or tea</td>
<td>28</td>
<td>9.5</td>
<td>22</td>
<td>7.5</td>
<td>107</td>
</tr>
<tr>
<td>Fizzy/high sugar drinks</td>
<td>68</td>
<td>22.4</td>
<td>82</td>
<td>27.1</td>
<td>107</td>
</tr>
<tr>
<td>Diet drinks</td>
<td>64</td>
<td>22.0</td>
<td>69</td>
<td>23.7</td>
<td>50</td>
</tr>
<tr>
<td>Yoghurt</td>
<td>4</td>
<td>1.4</td>
<td>42</td>
<td>14.5</td>
<td>96</td>
</tr>
<tr>
<td>Biscuits, cakes or pastries</td>
<td>12</td>
<td>3.9</td>
<td>29</td>
<td>9.5</td>
<td>70</td>
</tr>
</tbody>
</table>

**Note:** aIncludes supplied free.
Attitudes to sponsorship

Just over half of respondents (50.1 per cent) agreed or strongly agreed that they have severe moral reservations about the commercial sponsorship of school activities. Just under half (46.7 per cent) agreed or strongly agreed that the teaching staff are generally opposed to the commercial sponsorship of school activities and the promotion of company images on school premises. Just over a quarter (26.7 per cent) strongly agreed or agreed that they would like their school to receive more commercial sponsorship with 50.6 per cent disagreeing or strongly disagreeing. Just over half (56.7 per cent) strongly agreed or agreed that they believed themselves to be reasonably competent to negotiate sponsorship deals with for-profit organisations. Just over half of the respondents (51.3 per cent) indicated that they thought that sponsorship should be restricted in schools while about one-fifth (19.5 per cent) thought there should be more sponsorship activities.

Table IV illustrates the responses obtained regarding approaches for introducing change in the school-industry relationship. In terms of policy, 83.3 per cent strongly agreed or agreed that there should be a voluntary school policy, 56.7 per cent agreed that there should be a self regulatory code by industry and just under half (47.7 per cent) agreed or strongly agreed that there should be a legislative approach to change. A large majority (92.1 per cent) strongly agreed or agreed that there should be a clear code of practice in relation to provision and content of vending machines in schools while 87.3 per cent agreed or strongly agreed that there should be a national code of practice in place in relation to industry sponsorship and funding activities in schools and local communities.

Significant differences by respondent type emerged in relation to attitudes to sponsorship. Principals and Vice-Principals were most positive of all respondents about having a clear code of practice (Principals and Vice-Principals, 65.6 per cent; SPHE co-ordinators, 29.6 per cent; teachers and others 47.1 per cent; \( p < 0.05 \)) and voluntary school policies (Principals and Vice-Principals, 87.1 per cent; SPHE co-ordinators, 79.6 per cent; teachers and others 69.7 per cent; \( p < 0.05 \)).

However Principals and Vice-Principals were most negative about legislative change (Principals and Vice-Principals, 40.9 per cent; SPHE co-ordinators, 61.2 per cent; teachers and others 64.5 per cent; \( p < 0.01 \)). They were also most likely to report (\( p < 0.001 \)) that they felt they would be competent to negotiate sponsorship deals (Principals and Vice-Principals, 65.6 per cent; SPHE co-ordinators, 29.6 per cent;
<table>
<thead>
<tr>
<th>Approaches to introducing change</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Neither</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number</td>
<td>Per cent</td>
<td>Number</td>
<td>Per cent</td>
<td>Number</td>
</tr>
<tr>
<td>More communication between schools and industry</td>
<td>100</td>
<td>37.2</td>
<td>118</td>
<td>43.9</td>
<td>39</td>
</tr>
<tr>
<td>A voluntary school policy</td>
<td>95</td>
<td>35.2</td>
<td>130</td>
<td>48.1</td>
<td>34</td>
</tr>
<tr>
<td>Legislation</td>
<td>39</td>
<td>15.1</td>
<td>84</td>
<td>32.6</td>
<td>73</td>
</tr>
<tr>
<td>A self regulatory code by industry</td>
<td>37</td>
<td>15</td>
<td>103</td>
<td>41.7</td>
<td>58</td>
</tr>
<tr>
<td>Training for principals</td>
<td>90</td>
<td>32.7</td>
<td>112</td>
<td>40.7</td>
<td>51</td>
</tr>
</tbody>
</table>
teachers and others 47.1 per cent). No other patterns emerged by respondent type or school characteristics.

**Discussion**
In the context of the recommendations from the National Taskforce on Obesity (Department of Health and Children, 2005a), this study examined Ireland’s school food environment and associated healthy eating policies, investigated the extent of involvement of for-profit organisations, with a focus on in-school marketing, and whether this was guided by policy. In addition, the attitudes of respondents towards in-school marketing and proposed changes were explored.

*Food outlets and healthy eating policies*
This survey demonstrates a variety of food outlets in existence in post-primary schools in Ireland, with a high proportion also reporting a food shop close to the school grounds (64.4 per cent). The school environment has been shown to have a strong influence on students’ eating behaviours and physical activity patterns (Weschler et al., 2000). More specifically, the availability of food within or close to a school can influence school-children’s health, either directly, from consumption of the items, or indirectly, from the messages these items convey (Higgs and Styles, 2006). While it is likely that schools have no control over items on sale or purchased in shops, future work could investigate children’s food purchasing behaviour in and around school times and potential influencing factors.

Although nutritious foods such as milk, yoghurt, sandwiches and fruit are available in many schools, the simultaneous availability of confectionery, soft drinks, salty snacks and biscuits, which are recommended for consumption in small portions and only occasionally (Department of Health and Children, 2005b), could prevent children from developing healthy eating habits and attitudes. Changing the options available within school to a better choice of ready-to-eat foods and snacks (e.g. dried fruit, plain popcorn) could make an important contribution to healthier food choices in schools (Crawley, 2005). Although only a minority of specifically disadvantaged schools are currently in a position to offer school meals to students in Ireland via the school meals programme of the Department of Education and Science, guidance provided to these schools should be based on the best available evidence. Thus a detailed examination of the standards set for schools in the UK countries is warranted (www.schoolfoodtrust.org.uk; Scottish Executive, 2003). Practitioners providing support to schools should ensure that they include an assessment of the revisions that have been necessary to the UK guidance as well as the recommendations to schools on how to appropriately localise such standards (www.schoolfoodtrust.org.uk; Lang et al., 2006). Although the food choices of children were not investigated in this survey, documentation of the options available to children in schools is important and provides a baseline for future work that could investigate the influence of school food policy on school food availability.

The vast majority of respondents in this survey (92.1 per cent) agreed with the recommendation from The National Taskforce on Obesity to develop a code of practice in relation to vending machine provision and content (Department of Health and Children, 2005a). The report of the Taskforce recommends that industry, the Department of Education and Science and schools’ representative bodies develop the code. It is likely that the forthcoming food and nutrition guidelines for post-primary schools from the Department of Health and Children will provide guidance on vending
machine use and content. Nonetheless it is a challenge for schools to balance providing for the nutritional needs of students' and pupils' preferences, which influences supply of the items sold by the school, and the extra income generated for schools. In the US, the financial vulnerability of schools was considered responsible for the increase in in-school marketing over a ten-year period (Story and French, 2004). Yet profits for UK schools have been generated using healthy vending operations (Higgs and Styles, 2006) and the revised National School Lunch Program in the USA has not lead to a loss in total revenue to date (Wharton et al., 2008).

That more than one-third of Irish post-primary schools have a healthy eating policy is in line with a study of secondary school principals in Minnesota, USA (32 per cent) (French et al., 2002). In comparison, only 15 per cent of schools in Belgium-Flanders reported having written policies on biscuits, sweets and savoury snacks (Vereecken et al., 2005). However, it is difficult to make meaningful comparisons cross-nationally on the existence and nature of school food policies because of the distinct education systems as well as cultural differences, particularly in relation to food. For example, school meal provision varies considerably across Europe (Young et al., 2005) and this is likely to impact on the existence of school food policies and how comprehensive they are, or need to be. Future relevant work in Ireland could include systematic documentary analyses of school food policies and the extent to which they are influenced by best practice and the forthcoming food and nutrition guidelines for post-primary schools.

School food and nutrition policies can have an impact on students' food choices and diets (Vereecken et al., 2005; Wojcicki and Heyman, 2006; Veugelers and Fitzgerald, 2005; Lytle et al., 2006). These studies lend support to the broader implementation of policies that deal with food availability and food-related activities, which should help schools in Ireland create an environmental context where healthy food choices and behaviours are easier. The National Heart Alliance together with the Irish Heart Foundation (2008) and the National Taskforce on Obesity recommends that all schools should be guided by a health policy, in particular, opportunities for physical activity and what is being provided in school meals, including breakfast clubs and school lunches should be addressed (Department of Health and Children, 2005a). While many schools in Ireland are aligned with the Schools for Health in Europe (SHE) network (www.schoolsforhealth.eu), where a whole school approach to health is part of their ethos, more can be done to encourage, guide and implement healthy eating policies in Irish schools. A commitment to and belief in healthy eating policies and allowing adequate time for children and staff to become familiar with the policy, and adapt accordingly, are likely to be important factors when measuring success. Looking forward, Ireland is involved with the “Healthy eating and physical activity in schools” (HEPS) project (www.hepseurope.eu), which is connected to the SHE network, and whose aim is to support each member country with the development of national school policy on healthy eating and physical activity. This project should further highlight the importance of implementing school food policies as well as programmes to prevent obesity in a sustainable way and at school level for the health of children in Ireland.

Policies on commercial sponsorship and activities in schools
In terms of formal policy on sponsorship from for-profit organisations, Ireland compares poorly with the 14 per cent of secondary schools in Greater London with
such policies (Bennett and Gabriel, 1999). It is anticipated that the Irish Department of Health and children’s food and nutrition guidelines for post-primary schools will recommend a voluntary policy on commercial sponsorship in schools be developed. With over one-third of schools currently in receipt of sponsorship, a formal policy may help schools to negotiate with for-profit groups more easily and should help schools introduce change in the current situation, where desired.

This study has documented the broad range of services offered to schools by for-profit organisations and illustrates the extent of interaction between businesses and schools. There is some similarity between countries in the types of services offered to schools. In the study by Bennett and Gabriel, most sponsorship took the form of gifts of equipment (77 per cent), followed by the sponsorship of competitions and prizes (65 per cent), till voucher schemes (59 per cent), loans of company employees (56 per cent) and cash donations (56 per cent) (Bennett and Gabriel, 1999). In the USA, sponsorship of school events, token schemes, appropriation of space, sponsored educational material and privatisation (i.e. management of schools or school programs by private for-profit corporations) are just some examples of how commercial organisations are involved with schools, see (Molnar, 2005; Story and French, 2004). In Asia Pacific, food companies appear to be heavily involved in sponsoring school sports events (Robinson et al., 2008). While in the USA food sales remain the most prevalent form of commercial activity in schools, primarily the sale of soft drinks from vending machines (Story and French, 2004). This is mirrored in Ireland, where sponsorship of vending machines was reported by 13.0 per cent of schools and the reported presence of drinks vending machines (44.7 per cent) and snack vending machines was higher (28.0 per cent).

The acceptance of commercial sponsorship appears, in the majority of schools in Ireland, to be influenced by a lack of funds for essential equipment, in particular sports equipment and IT equipment. This may explain the desire to obtain more commercial sponsorship which was expressed by over a quarter of respondents. The need to prioritise the provision and maintenance of physical activity facilities in Irish schools was highlighted by the National Taskforce on Obesity (Department of Health and Children, 2005a). This would go some way to helping schools to be less reliant on for-profit organisations for funding equipment.

In Ireland, there appears to be no system for tracking and monitoring sponsorship in schools. Matthews found that while advertising budgets for television may be declining, small but rising proportions appear to be diverted to schools, as well as via the internet (Matthews, 2007). Story and French (2004) state that from 1994-2004, the use of public schools in the USA as advertising and marketing venues has grown.

The National Taskforce on Obesity has recommended a national, regularly reviewed code of practice in relation to industry sponsorship and funding of activities in schools and local communities (Department of Health and Children, 2005a). The majority of respondents in this survey are in favour of such a code, either on a voluntary basis, self-regulation by industry or a legislative change. Differences by respondent type may well be explained by Principals and Vice Principals’ experiences of the difficulties of working without a policy framework to guide day-to-day decision making, and their reluctance to be required to follow legislative guidelines and potentially incur legal sanctions. Existing European self-regulatory approaches aim to ensure that marketing promotions are responsible but they currently do not attempt to address the volume of advertising or other marketing practices and they are not being
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monitored in relation to their effect on children’s diets (WHO Forum and Technical Meeting, 2006). Hawkes, in her review of self-regulation of food advertising (per se), argues that an independent body concerned with public health should guide such a process (Hawkes, 2005). In the UK a Government White paper (Department of Health, 2004) called on the food industry to self-regulate their promotional activities so as to reduce children’s (TV) exposure to marketing for less healthy foods. A lack of subsequent change resulted in a ban on the promotion of foods high in fat, salt and sugar during children’s (under 16 years) television programming, introduced at the beginning of 2008 (www.ofcom.org.uk/consult/condocs/foodads_new/statement/). Similar restrictions have been called for in Ireland and the issue is currently under debate (National Heart Alliance and Irish Heart Foundation, 2008).

Irrespective of the provision of school meals, the data presented here, when taken together with evidence from other jurisdictions, highlight the relative importance of expanding policy to encompass a more holistic view of students’ experiences in school, including their exposure to marketing efforts. Those working towards child health improvement need to be cognisant not only of existing marketing strategies, but the potential risks associated with de-regulation or self-regulation (Robinson et al., 2008; Hawkes, 2005) and indeed must engage in ensuring that the macro economic environment is conducive to healthy public policy. The general lack of systematic patterns in responses by school type indicates that there is no immediate need to tailor any intervention for specific schools, but rather that it would be possible to take a national approach to policy and practice development.

In terms of the strengths and limitations of this survey, this is the first study to report on healthy eating and in-school marketing policies in post-primary schools in Ireland and the involvement of commercial organisations in schools. While there are parent/teacher associations in existence which are likely to be interested in school food policy and food provision, there is currently no national association or nutrition/food action group bringing together all stakeholders that could have been consulted to add to or compliment this survey. The school response rate (44.7 per cent) is not dissimilar to other studies (e.g. Bennett and Gabriel, 1999) and the sample is generally representative of school types in the Republic of Ireland, in terms of gender composition, governance and disadvantage. It is likely that refusal to partake was strongly influenced by involvement in other studies, which has also been reported as the main reason for non-response in other studies (Vereecken et al., 2005). It is important to recognise that the reported attitudes of respondents do not necessarily reflect the entire school staff as only one member of staff, the Principal in the majority of schools, completed the survey. In-depth qualitative research with school staff would capture a clearer and more comprehensive picture of staff attitudes to commercial sponsorship, and food marketing in particular, in schools.

Conclusion

These data illustrate the extent of involvement of commercial organisations in post-primary schools in Ireland and how food sales are a prevalent form of commercial activity. While there is a desire for a change in this relationship by some, there are others who are interested in more sponsorship opportunities. This may be related to the lack of funding available to particular schools. The extent of in-school marketing in Ireland is small compared to the USA but with a reported move away from television
advertising it is possible that it may increase in Ireland. Thus, having policies in place in school and at a national level, through which issues concerning school food availability and industry sponsorship are addressed, are needed. Schools are open to receiving guidance and support in developing such policies, which is particularly needed in the case of involvement of industry in schools, since no progress on this recommendation by the Obesity Taskforce has been achieved to date (Department of Health and Children, 2009).

References


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