

Children's food advertising: challenges to the federal management of the SUS and opportunities for health communication

A publicidade infantil de alimentos: desafios à gestão federal do SUS e oportunidades para a comunicação em saúde

Mariella Silva de Oliveira-Costa^a

 <https://orcid.org/0000-0003-4853-3677>

E-mail: mariella.costa@fiocruz.br

^aFiocruz. Gerência Regional de Brasília. Assessoria de Comunicação. Brasília, DF, Brasil.

Abstract

This study analyzes the ability of public health policies to dispute meaning in the construction, of the world caused by the media and the need for state regulation of food marketing for children. These advertisings influence children's food choices, forming a palate used to consuming ultra-processed products (harmful to health) since childhood. With a qualitative approach, the research interviewed, over the span of a decade, the public administrators at a federal level to understand the execution of the agenda for strengthening the regulation of advertising of food aimed at children. This agenda aims to strengthen health promotion actions and contribute to the prevention of chronic non-communicable diseases. The influence of the food industry, with the communication industry, has restricted the development of public policies in Brazil, and the topic needs social participation since the existing law is not applied.

Keywords: Food; Public Policy; Health Communication; Health Promotion; Childhood; Advertising.

Correspondence

Fiocruz. Gerência Regional de Brasília. Assessoria de Comunicação.
Av. L3 Norte, s/n Campus universitário Darcy Ribeiro, Gleba A,
Asa Norte. Brasília, DF, Brasil. CEP: 70904-130

Resumo

Este estudo analisa a capacidade de as políticas públicas em saúde disputarem sentido na construção de mundo provocada pelos meios de comunicação e a regulamentação estatal da publicidade infantil de alimentos. Estes anúncios influenciam as escolhas alimentares das crianças, formando um paladar habituado ao consumo de ultraprocessados (prejudiciais à saúde) desde a infância. Por meio de uma abordagem qualitativa, a pesquisa entrevistou gestoras em nível federal para compreender a agenda de fortalecimento da regulamentação da publicidade de alimentos destinados ao público infantil executada ao longo de uma década, que tem o intuito de fortalecer as ações de promoção da saúde e contribuir com a prevenção das doenças crônicas não transmissíveis. A influência da indústria de alimentos, por meio da indústria de comunicação, tem restringido o desenvolvimento de políticas públicas na área de alimentação no Brasil e o tema precisa de participação social pois a lei existe, mas não é aplicada

Palavras-chave: Alimentação; Políticas Públicas; Comunicação em Saúde; Promoção da Saúde; Infância; Publicidade.

Introduction

Excess weight is a trigger for certain chronic non-communicable diseases (CNCDs) (Brasil, 2014), which result from a combination of factors that originate in lifestyle, including food choices. The main expenses of the Brazilian National Health System (SUS) originate from treating people who end up affected by these diseases (Brasil, 2011a). Moreover, part of what is advertised by the food industry are products with little or no nutrients, which may lead to an increase in NCDs in Brazil. Therefore, regulating children's food advertising is one of the ways to combat the increase in these health problems.

Given the media's leading role in shaping our understanding of reality (Luhmann, 2011) and the advertising's role as a promoter of brands and abstract consumer values (Baudrillard, 1995), which can affect children's food choices, it is widely acknowledged that a preference for ultra-processed foods is formed from a young age.

The Brazilian Ministry of Health (MoH), by its *Coordenação Geral de Alimentação e Nutrição* (CGAN - General Coordination of Food and Nutrition), aims to enhance strategies for regulating food advertisements targeted at children; and Health Communication, a cross-cutting and multidisciplinary field, has the potential to aid in management (Schiavo, 2007). Public health communication needs to explore new approaches for more effective actions (Araújo; Cardoso, 2007) and, by analyzing a decade of action (and inaction), it is possible to qualify future actions in this field and other public health policies. Therefore, this study questions: what were the challenges and opportunities faced by CGAN/MoH public administrators from 2010 to 2019 in implementing this agenda?

SUS, obesity and CNCDs

The concept of Social Determinants of Health (SDH) is linked to the contexts that contribute to people staying healthy and not just the assistance received when their health is compromised (Dahlgren; Whitehead, 1991).

The 2017-2018 *Pesquisa de Orçamentos Familiares* (POF - Brazilian Household Budget Survey), which

analyzed personal food consumption in Brazil, showed that drinks with a high energy content and low nutritional value are widely consumed among adolescents. When compared to adults and older adults, adolescents' consumption of fresh foods is lower and consumption of ultra-processed foods is higher (IBGE, 2020), a dietary behavior that can lead to obesity and CNCDS. This same result was found in the 2008-2009 POF (IBGE, 2011), and it is assumed that the children of the past decade have become adolescent consumers of these products. In Brazil, from 2006 to 2018, the percentage of people with obesity rose from 11.8% to 19.8% (Brasil, 2019).

The causes of CNCDS are also the result of a combination of historical factors and economic, social, and cultural situations that converge directly on the individual's food choices, which are influenced by what is advertised in the media and sold by the food industry in various commercial establishments (MS; OPAS, 2014).

Ultra-processed foods are referred to as such since they are manufactured in large industries, where high concentrations of salt, sugar, oils, fats, and exclusively industrial substances are used in the production process (Brasil, 2014).

There is a dispute in the field of food and nutrition regulatory actions, with cross-cutting concerns and strategies that relate to the control and prevention of CNCDS. In this context, an interesting field of study is understanding how management perceives and connects with the internal and external challenges that arise with each decision and action, and how Health Communication can contribute to strengthen health promotion actions.

The social construction of the world, seduction, and hijacking of children's food choices

Advertising influences the social environment and the relationship between individual and society. It acts as a tool of control, promoting a level of subjective consensus in the structure of society's values. In this process, a threat arises: non-compliance with the behaviors and standards exhaustively demonstrated in advertisements is punishable by social isolation (Noelle-Neumann, 2017).

The ability to control behaviors and standards gives advertising the ability to dictate behavior, building a society that recognizes itself mainly by its consumption capacity. This social model imposes a new process of alienation, that of living regulated by desire shaped by the market, which regulates not only labor and what is produced, but the entire culture. Everything is *spectacularized*, orchestrated into images, signs, and consumable models (Baudrillard, 1995).

In this context, advertising sells lifestyle projections, as is the case with soft drink ads (Figure 1), which convey the idea of happiness, youth, energy, and health. The art of advertising lies in proposing persuasive statements; there is no absolute truth, nor are there any false promises. "Images merely illustrative!" The successful advertising agent abuses poetic license and creates truths just by claiming that they are (Baudrillard, 1995)

Figure 1 – Advertising of sugary drink Coca-Cola (2020)



Source: Youtube, Coca-Cola Brasil.

Food is no different. Families feed their children cookies, soft drinks, and frozen foods for status and “practicality.” Offering excess calories to your children can be considered a gesture of affection for the less informed. Despite the legal limits on the act of consciously circumventing the consumer in advertising, media companies argue that consumers have the freedom to decide and they desire that which they would never want without advertising (Luhmann, 2011).

Advertising creates a favorable environment for all products to attract interested consumers by developing a strong emotional connection that leads to consumption. Notably, ultra-processed food manufacturers have been retaining customers since childhood, making it necessary to establish regulations. The cognitive construction of the world by food advertising (mostly industrialized products) influences the choices of adult individuals (MS; OPAS, 2014). When the issue is restricted to children’s food advertising, the situation is even more delicate since children are vulnerable. Compared to an adult, they lack the intellectual maturity to understand the persuasive strategy of advertising language (Cazzaroli, 2011).

The growth in the consumption of ultra-processed foods is aided by the sophisticated marketing strategies of the large food industries and this set of factors increases the number of cases of obesity and other CNCDS (Monteiro; Castro, 2009).

On average, 50% of children with obesity carry this condition into adulthood and 80% of adults with obesity remain so throughout their lives (Simmonds et al., 2015). Overweight is usually associated with diabetes, hypertension, and cancer, diseases that directly affect the increase in SUS expenditure (Siqueira; Siqueira-Filho; Land, 2017).

In this context, the Executive Branch in Brazil has developed cross-cutting strategies for the control and prevention of obesity and CNCDS, one of which was the regulation of children’s food advertising.

Health regulation and communication

Reducing society’s exposure to factors and situations that encourage the consumption of unhealthy foods is one of CGAN’s responsibilities. To this end, the Brazilian National Food and

Nutrition Policy (PNAN) proposes actions such as regulating the sale and advertising of food in school cafeterias and advertising aimed at children, as well as the labeling of products aimed at babies (Brasil, 2011b).

International academic literature has shown the need for government regulation of food advertisements aimed at children and adolescents, as well as the importance of monitoring their implementation (Silva; Oliveira-Costa, 2021).

There is a connection between regulatory actions and those aimed at educating society about the processes that affect family health. Including Health Communication in the planning and execution of the programs and projects of the Ministry of Health is important to improve public policies.

An effective health communication action needs well-structured planning, clear identification of the situation to be overcome, a well-defined strategic audience, the most appropriate media to reach these people, as well as economic sustainability. The lifestyles of this strategic audience must be considered, and the messages must be designed with content that facilitates adherence to the guidelines received. It is necessary to overcome the model of vertical transmission of content and health communication must be understood as part of a chain of production of social meanings (Schiavo, 2007).

By analyzing the Brazilian Ministry of Health’s communication strategies in Brazil from 2006 to 2013, few actions were found to focus on promoting healthy habits, including diet, and prioritizing disease prevention over health promotion (Vasconcelos; Oliveira-Costa; Mendonça, 2016). This warns of the need for technical and financial investment to change this scenario, which is also a challenge for the macro management of the Brazilian Ministry of Health.

Methodology

This qualitative study seeks the meanings of social actions and the subjectivity of individuals, considering their social context (Minayo et al., 2005). After the bibliographic research, field research was organized, conducting interviews for data collection, emphasizing “the use of words, [...] by which social actors construct

and try to make sense of the reality that surrounds them” (Fraser; Gondim, 2004; our translation).

The research corpus is representative since it contains the full content of interviews conducted with the four public administrators in the area during the period proposed for analysis. It is also exhaustive and relevant since the interviews were considered in full and both the questions and answers are related to the objectives and the theoretical framework. It is a homogeneous corpus since both have the same nature and refer to the same subject.

The online interviews were conducted during the pandemic, with the approval of the Fiocruz Brasília Research Ethics Committee (CAAE 29554320.5.0000.8027). The audio was digitally recorded and then transcribed. The interviews were submitted to a content analysis (Bardin, 2011). To this end, using “recording units” (Gomes, 2002), the interviewees’ speeches were organized according to the corresponding and specific categories, based on the floating reading of the transcript, which consists

of establishing the first contact with the results of the interviews, getting to know the text, allowing oneself to be immersed in the speeches and perceptions of the CGAN public administrators (Bardin, 2011).

The recording units with a similar theme were grouped into categories and their frequency counted, with the possibility of considering one or more sentences with the same argument. Each recording unit was counted only once in a single category (Chart 1).

The interviewees signed an informed consent form, which presented minimal risks, such as discomfort and embarrassment caused by the situation of recording the interviews. To minimize these situations, the recording was allowed to be interrupted at any time if participants wanted. The statements made by these public administrators expose the subtleties of working in the federal executive, a place where political interests are balanced. In this study, to anonymize the data, the public administrators were given code names, all of which relate to food and nutrition: Rosemary, Cocoa, Pepper, and Blackberry.

Table 1 – Frequency of categories identified in interviews with CGAN public administrators, Brazilian Ministry of Health

	COLOR	CATEGORY	N	%
1	Yellow	Regulations and editorial publications	25	12,6
2	Red	Challenges of the CGAN/MS agenda	28	14,1
3	Green	Potentials of the CGAN/MS agenda	16	8,1
4	Blue	Intersectoral Articulation	26	13,1
5	Grey	Public Policy Dispute Arena	34	17,2
6	Purple	Public Opinion, engagement production	11	5,6
7	Light Blue	Brazilian Ministry of Health Communications Office	15	7,6
8	Orange	Health Communication, where and how to act	43	21,7
TOTAL			198	100

Source: developed by the author, 2021

Perceptions, technical arguments, and economic interests

The regulation of children’s food advertising is a cross-cutting agenda that has led to debates in civil society, as well as in the Legislative and Judicial branches This article presents the particular perceptions of CGAN/MS public administrators who worked in coordination from 2010 to 2019. They graduated in Nutrition and Public Policies on Health and Nutrition. They are specialists, masters, and PhDs.

Chart 1 summarizes the categories that emerged during the content analysis of interview transcripts. Content analysis allows for the classification of message components into categories of drawers, each storing content with similar meanings (Bardin, 2011).

The first category covers statements on the regulations and editorial products that formalized the agenda at CGAN/MS and disseminated the work produced inside and outside the health sector. The next category deals with the challenges faced by public administrators on this agenda. Then, the

advantages, privileges and, above all, the place of prestige that the CGAN/MS has built (and established) to promote debate and analysis. The fourth category, intersectoral articulation, deals with this space of support and dispute over the prioritization of agendas between institutions. The arena of dispute for the elaboration of public policies hosts these debates, organizing perceptions regarding internal barriers, in the Brazilian Ministry of Health, and external barriers, such as in the Legislative and Judicial branches. In the category “Public opinion, engagement production,” the focus is on the extent to which the CGAN/MS message on ultra-processed foods reaches society. This question relates to the interviewees’ perception on the performance of the Brazilian Ministry of Health’s communication centers in this agenda. Lastly, the last category covers how Health Communication can and should be included in the promotion and qualification of messages to strengthen the agenda of regulating children’s food advertising.

All categories underpin the following analysis. The arguments were used in a mixed way, elaborating a mosaic on the strengthening of the regulation of children’s food advertising in the Brazilian Ministry of Health, from 2010 to 2019.

The law exists but it is not enforced

This statement says a lot about the normative production of a portfolio in the Executive branch. The standard or the published editorial product does not guarantee that an agenda will happen, but it is fuel for the intended topic to remain on the agenda.

In 2010, CGAN/MS contributed to the publication of Anvisa’s RDC N°. 24. The regulation was suspended even before it produced legal effects, but it is considered an important milestone among the initiatives for the agenda (Baird, 2016). The people involved knew that the food industry would work to undermine it, and that this was a possible scenario. According to Rosemary, the bet was the confidence that, from it, new discussions would emerge.

I am on the side of publishing! Although imperfect, let’s do it! It opens up an agenda, it opens up a space for discussion. That is my view on public policy.

This adds up [...] and creates more conditions for the debate to occur. (Rosemary)

Conanda’s proposal followed a similar approach, published in Resolution No. 163 of March 13, 2014, aimed at restricting “advertising of any kind to children, understanding [...] their fragility as recipients...”, as reported by Cocoa. After its publication, it did not serve as an effective barrier to advertising aimed at children (Jesus; Boff; Werle, 2019). The two regulations can be considered the most relevant over the last 10 years and, in fact, produce reflections on the subject.

Because it is “[...] a very evidence-based coordination,” as Blackberry stated, various materials are designed to facilitate the population’s access to products that contribute to the emergence of CNCDS. Editorial or regulatory products have added value to the guidelines issued by this technical area. The Food Guide for the Brazilian Population (Brazil, 2014) is the material that comes most easily to the interviewees’ minds. At various times, it was common for its content to be cited, mixed with the participants’ own ideas.

In general, according to Rosemary, “*the norm arises [...] from this production [...], which is a content production so commendable that has the participation of various wings of nutrition, [...] a scope of universities. All of this, let’s put it this way, emerges!*” These materials inspire and drive various agendas in the Executive branch. This mix of scientific production between health and nutrition is an important part of the communication that takes place in nutrition. And, via this communication, “*we try to reach the healthcare professional and the family*” (Blackberry).

Great vocalization

The concern for the quality of the internal content positions the coordination in a prestigious role. For Cocoa, “[...] CGAN’s potential for discussion [...] is the legitimacy of the technical area in the dialog with other sectors, outside the health sector.” According to Rosemary, “*the CGAN institution [...], as the Ministry of Health’s nutrition coordinator, [...] has a huge*

vocalization capacity.” The repercussion generated by its documents and regulations echoes in other sectors.

[...] PNAN, is a reference policy. And when one visits, for example, the Anvisa website, now that the revision of food nutrition labeling is being debated [...], Anvisa clearly says that it is guided by a SUS policy, which is the National Food and Nutrition Policy. (Cocoa)

To broaden the discussion on the regulation of children’s food advertising, considering these characteristics and relevance, Blackberry points out that “[...] *the CGAN’s [...] focus is on childhood obesity,*” which “*is the most prevalent disease related to poor diet during childhood.*”

Studies conducted in the United States and England, as well as in Brazil and England, have compared the impact of strengthened laws targeting the supply of ultra-processed foods and efforts to reduce sugar, fat, and salt in processed foods (Silva; Oliveira-Costa, 2021).

The CGAN/MS defines its objectives in actions that interact with each other and with sectors outside the health sphere via legal frameworks and editorial publications. The sum of this production is echoed in the academic world, in the public sphere, and in society. The strength of the coordination lies precisely in the recognition and prestige of its technical and scientific production.

Not only individual responsibility, but protection of offer quality

The PNAN presents the open concept of food safety and based on an expanded view of risks, discusses the effects of ultra-processed foods on the health of the population. With this vision of risks, it defends the regulation and control of food, highlights Cocoa, with CGAN actions in the following axes: incentive, support, and protection.

To encourage healthy food consumption, the strategy seeks to extensively use channels that bring the topic closer to the population, developing communication that stimulates the ability to distinguish healthy food from ultra-processed food, which is considered risky (Cocoa). Raising awareness among families is an important goal to achieve, after all, children reproduce what they see at home (Pepper).

In the field of support actions, CGAN’s proposal is to develop mechanisms that facilitate access to healthier diets, encouraging family agriculture, promoting the availability of healthy food, and reducing the prices of organic food, for example. It involves the exercise of a set of policies: from income to the availability (distribution) of healthy food. However, according to Blackberry, it is important to note that “*this is more of an individual issue,*” and each person’s choice is affected by the social construction around them, including what is disseminated by advertising.

In the protective dimension, there is the defense for more public environments without advertising and access to ultra-processed foods. As Blackberry points out, “*the evidence shows the importance of a protective school environment.*” In this sense, it is necessary to strengthen rules for advertising and nutritional labeling to ensure that the information disseminated by the food industry is understandable to citizens, protecting and qualifying purchasing and consumption decisions (Cocoa).

This concern considers the mechanisms by which interactions between various levels of social context produce inequalities in health, considering the individual factors, but also the economic, cultural, and environmental factors that characterize a person’s place in a society (Dahlgren; Whitehead, 1991).

Lobbying and intervention, prioritizing the health of the economy

Restricting the advertising of ultra-processed products to children is a challenging proposition for the food and communications industries. According to Blackberry, “*it is an agenda, which [...] requires a lot of confrontation from the decision-maker, not all public administrators above coordination [...] decide to face it.*” Opposition to the issue arises within the Ministry of Health itself and there is external pressure due to the political context.

For Rosemary, this is a sensitive issue and “*politically, the higher ranks [...] find it difficult to manage due to the many interests involved, many relationships...*” The regulatory agenda becomes an exercise in resilience: “*It never comes up since it is a backroom fight. And if it appears, the industry comes and attacks*” (Pepper).

In this adverse field, it is necessary to adapt and use other strategies, inserting the theme of regulation in other activities. The challenge was to establish a narrative in which senior public administrators from the Brazilian Ministry of Health did not have to speak out and oppose it. The record of the meeting on May 5, 2011, between the Minister of Health at the time, Alexandre Padilha, and the president of the McDonald's chain in Latin America, Marcelo Rabach, exemplifies the constraints. The image was briefly available on the federal agency's Flickr¹ gallery with the following caption: "Minister Alexandre Padilha meets with Marcelo Rabach, President of McDonald's in Latin America, one of the health partners".

In the image, Rabach hands out a sample of the paper towel that covered the company's trays in March and April of that year with tips on practicing physical activity, drinking water, eating healthily, among other healthy practices. This strategy by the fast-food chain proves that the ultra-processed food industry permeates the daily life of the Ministry of Health, not only seeking to add the concept of health to its products, but also, in a way, to influence the social perception of the agency's public policies. The photo was removed from the site after numerous criticisms.

Figure 2 – The Ministry of Health and the health partner: McDonald's



Source: Leme (2011)

Intersectorality, advocacy, and practice

The confrontation with the productive sector and the communication agencies can be characterized as main obstacles for public administrators. As Pepper

explains: "Why? Because the pressure from industry, the industry lobby, is very strong." Advertising for industrially produced food invests heavily in the healthy imagery. Rosemary states that it is a narrative that is present in various media. While the CGAN/MS budget is only a few million, the ultra-processed food and sugary drinks industry spends billions on advertising. Without regulation in mass media, public health has no chance of success in this dispute over what healthy eating is, which justifies the need to balance these forces.

In this environment, according to Rosemary, starting with health, "as the carrier of the regulatory agenda, [...] CGAN/MS cannot act alone." Intersectoral coordination is a basic necessity if the issue is to remain on the federal government's agenda. However, according to Cocoa, "talking about intersectorality is very nice, but doing intersectorality is a challenge!".

Despite the strength of the spaces for sharing institutional governance, the challenges were sometimes explicit and sometimes subtle. Openly declared, the Ministry of Agriculture, Livestock, and Supply (MAPA), through its departments linked to the defense of agribusiness, and the Brazilian Ministry of Development, Industry, and Trade (MDIC), which, according to Pepper, is responsible for defending business interests, were against any movement that sought to regulate the activities of industry.

However, the other institutions that shared interests closer to the agenda of adequate and healthy food, as well as children's rights, did not explicitly support the agenda of regulating children's food advertising. According to Rosemary, "They did not oppose it, [...] but it was not explicit." The possibility of clashes with the economic industry constrained other bodies. As Rosemary states: "And that is how the game of institutions is, each institution has its purpose. They work on intersectorality, but [...] each one is prioritizing their own agenda."

During the intersectoral exercise, there is a need to articulate with the productive sector, a reality perceived as an intimidating process for advancing the regulatory agenda. For this reason, in the search for strength, there is a common desire for a specific regulation, voted by

¹ Flickr is a website for hosting and sharing photographic images

the Brazilian National Congress, that explicitly restricts children's food advertising, diluting the personalization of the agenda to a specific body.

More protection with health communication

In Brazil, there is a legal framework (Federal Constitution, Statute of the Child and Adolescent, and Consumer Defense Code) that protects children; however, as mentioned, although the law exists, it is not enforced. In this sense, it is not advisable to waste energy on producing more regulations, but rather to qualify what is already standardized, seeking the support of society in the hope that, with the sum of voices, it will be possible to enforce existing legislation.

CGAN has a list of technical-scientific editorial products recognized in academia and civil society that reach part of public opinion. As Rosemary points out, *“an important task for Health Communication [...] is to transform this scientific knowledge into something that the population understands.”*

These documents act on the social imagination, in the formation of a collective that values healthy eating (Rosemary). However, in the dispute over narratives, we must qualify the understanding that ultra-processed foods are not as healthy as they are advertised, and health communication can broaden the scope of what is discussed in this agenda. It is necessary to know how to communicate the importance of the agenda and develop activities that engage with the children's guardians and caregivers, thinking carefully about what message to convey and the channel to be used, as well as promoting access to this truthful and qualified information.

In Brazil, there are various levels of access to information. In order to communicate with all audiences, and not just the middle class, there is a need for a joint effort, considering more structural actions to guarantee the human right to healthy food, which goes far beyond the knowledge and information that can be spread via the usual channels already used by the industry (Cocoa).

The CGAN/MS technical team has been recently working with the recommendation of “less screen time” within the actions that are part of the “Prevent Childhood Obesity” program, and it would be incoherent to propose communication strategies

that suggest a TV, tablet, or cell phone for interaction (Blackberry).

With constant updating and technological development, health communication is increasingly assuming a key place in contemporary society. In the context of Brazilian public health, this understanding is verbalized in many spaces, but little value is effectively placed on the implementation of the Brazilian Ministry of Health policies and programs. Moreover, it is important to overcome the supporting view of communication as a mere advisory activity to publicize the achievements of public administrators (Oliveira-Costa; Fernandes; Vasconcelos, 2022).

The Brazilian Ministry of Health has not used any communication actions to strengthen the agenda of regulating children's food advertising over the past decade. However, there was this concern at another time. Knowing how to develop dialogues on the subject was the proposal of a research initiative, which unfortunately was unsuccessful, according to Pepper, *“because we forgot to publicize it to the communication faculties.”* Therefore, bringing health closer to the communication faculties should be part of the strategies for disseminating this agenda.

The population does not necessarily need to know the so-called “Dietary Guideline for the Brazilian Population,” but the orientations contained in its publication. The strengthening of the SUS by qualified information sharing is a responsibility of Health Communication. A better-informed population can make more assertive decisions about the factors and actions that influence their health. This awareness can even make society embrace public policies that aim to create more environments that facilitate healthier decision-making, such as the regulation of children's food advertising.

Final considerations

From 2010 to 2019, CGAN/MoH used its main potential, its prestige, and its ability to amplify the voice of food and nutrition issues beyond the health field, in a transversal way, with other portfolios of the Brazilian federal executive branch and with organized civil society. This articulation has been fundamental in addressing CNCs, since regulating children's food advertising alone will probably not

bring the expected results, and this is one slice of several actions that cannot be conducted in isolation.

The main challenge faced is the constant presence of the lobby industry (food and communication) in Brazilian Ministry of Health. The main finding of this work is that it has uncovered this reality. The place of management of the General Coordination of Food and Nutrition Policy is lonely and remains at the center of a technical and political clash that is influenced by these industries. As a way of circumventing the limits imposed, promoting the agenda by publishing editorials or norms was a CGAN/MS strategy to keep the issue on the agenda of federal management.

Without effective hierarchical support during the analyzed period, only good intentions were noted, with no concrete contribution to the regulation of children's food advertising. Faced with this inertia, energy was directed towards promoting the creation of more laws, expecting legislation to transform this scenario. However, historically, the mere existence of a regulation does not guarantee compliance.

In recent years, the regulations considered most relevant to regulating the issue have been published by Anvisa (RDC No. 24, of June 15, 2010) and CONANDA (Resolution No. 163, of March 13, 2014). However, both did not achieve the desired concrete legal effect. On the other hand, these initiatives produced debates in various segments, keeping the discussion alive. The Dietary Guidelines for the Brazilian Population (Brasil, 2014), among the editorial publications, is the most relevant material.

A significant opportunity was noted for Health Communication to enhance the agenda by increasing accessibility of technical, scientific, and normative materials to those in disadvantaged social situations with limited access to the Brazilian Ministry of Health technical information, as well as in other social segments. The aim is to generate engagement in complying with existing child protection regulations and promoting healthy nutrition initiatives.

Therefore, to enhance the intersection between these fields of knowledge: For Health and Communication, it is crucial to include social communication professionals into technical production spaces. Their focus should be on translating the technical language used in most

editorial productions and different management spaces of the Brazilian Ministry of Health. Moreover, it is essential to encourage studies with teaching and research institutions, including communication faculties, through public actions that aim to enhance health promotion and communication across all communication channels with the Brazilian population, with a special emphasis on the influence of advertising on the dietary choices of Brazilian children and adolescents.

References

- ARAÚJO, I. S.; CARDOSO, J. M. *Comunicação e Saúde*. Rio de Janeiro: Fiocruz; 2007.
- BAIRD, M. F. O lobby na regulação da publicidade de alimentos da Agência Nacional de Vigilância Sanitária. *Revista de Sociologia e Política*, Curitiba, v. 24, n. 57, p. 67-91, 2016.
- BARDIN, L. *Análise de Conteúdo*. Lisboa: Edições 70; 2011.
- BAUDRILLARD, J. *A sociedade de consumo*. Lisboa: Edições 70, 1995.
- BRASIL. *Plano de ações estratégicas para o enfrentamento das doenças crônicas não transmissíveis (DCNT) no Brasil 2011-2022*. Brasília, DF: Ministério da Saúde, 2011a.
- BRASIL. Ministério da Saúde. *Portaria nº 2715 de 17 de novembro de 2011. Atualiza a Política Nacional de Alimentação e Nutrição*. Diário Oficial da União, Brasília, DF, 19 nov. 2011b.
- BRASIL. *Guia alimentar para a população brasileira. 2. ed.* Brasília, DF: Ministério da Saúde; 2014.
- BRASIL. *Vigilância de fatores de risco e proteção para doenças crônicas por inquérito telefônico: estimativas sobre frequência e distribuição sociodemográfica de fatores de risco e proteção para doenças crônicas nas capitais dos 26 estados brasileiros e no Distrito Federal em 2018*. Brasília, DF: Ministério da Saúde, 2019.

- CAZZAROLI, A. R. *Publicidade Infantil: o estímulo ao consumo excessivo de alimentos*. Âmbito Jurídico, São Paulo, v. 14, n. 92, 2011.
- COCA-COLA: Explosão de Felicidade. [s.n.:s.l.], 2011. 1 vídeo (1 min). Publicado pelo canal Coca-cola Brasil. Disponível em: <<https://www.youtube.com/watch?v=7MVGkb77IrI>>. Acesso em: 5 fev 2020
- DAHLGREN, G.; WHITEHEAD, M. *Policies and Strategies to Promote Social Equity in Health*. Copenhagen: Institute for Future Studies; 1991.
- FRASER, M. T. D.; GONDIM, S. M. G. Da fala do outro ao texto negociado: discussões sobre a entrevista na pesquisa qualitativa. *Paidéia*, Ribeirão Preto, v. 14, n. 28, p. 139-152, 2004. DOI: <https://doi.org/10.1590/S0103-863X2004000200004>
- GOMES, R. A análise de dados em pesquisa qualitativa. In: DESLANDES, S.; MINAYO, M. C. S. *Pesquisa social: teoria, método e criatividade*. 21. ed. Rio de Janeiro: Vozes, 2002. p. 67-80.
- IBGE - INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA. *Pesquisa de Orçamentos Familiares 2008-2009: análise do consumo alimentar pessoal no Brasil*. Rio de Janeiro, 2011a.
- IBGE - INSTITUTO BRASILEIRO DE GEOGRAFIA E ESTATÍSTICA. *Pesquisa de Orçamentos Familiares 2017-2018: análise do consumo alimentar pessoal no Brasil*. Rio de Janeiro, 2020.
- JESUS, J.; BOFF, S.; WERLE, V. *O direito contemporâneo em perspectiva: um olhar interdisciplinar*. Erechin: Deviant, 2019.
- LEMES, C. *Ministro Padilha, "filho feio" não tem pai!*. 2011. 1 fotografia. Disponível em: <<http://900.gl/KUWCoY>>. Acesso em: 28 fev. 2021.
- LUHMANN, N. *A realidade dos meios de comunicação*. 2. ed. Paulus; 2011.
- MINAYO, M. C. S et al. Métodos, técnicas e relações em triangulação. In: MINAYO, M. C. S.; ASSIS, S. G.; SOUZA, E. R. (Org.). *Avaliação por triangulação de métodos: uma abordagem de programas sociais*. Rio de Janeiro: Fiocruz, 2005. p. 61-99.
- MONTEIRO, C. A.; CASTRO, I. R. R. Por que é necessário regulamentar a publicidade de alimentos. *Ciência & Cultura, Campinas*, v. 61, n. 4, 56-59, 2009.
- MS - Ministério da Saúde; OPAS - Organização Pan-Americana de Saúde. *Perspectivas e desafios no cuidado às pessoas com obesidade no SUS: resultados do Laboratório de Inovação no manejo da obesidade nas Redes de Atenção à Saúde*. Brasília, DF: Ministério da Saúde, 2014.
- NOELLE-NEUMANN, E. *A Espiral do Silêncio: opinião pública - nosso tecido social*. [S. l.]: Estudos Nacionais; 2017.
- OLIVEIRA-COSTA, M. S.; FERNANDES, M. F. M.; VASCONCELOS, W. *O recado está dado: a covid-19 e suas repercussões para a comunicação em saúde nas instituições públicas*. *Cadernos Ibero-Americanos de Direito Sanitário*, v. 11 n. 2, p. 175-182, 2022.
- SCHIAVO, R. *Health communication: from theory to practice*. São Francisco: Jossey-Bass; 2007.
- SILVA, M. A. S.; OLIVEIRA-COSTA, M. S. A Regulamentação da publicidade infantil de alimentos: potencialidades para a Comunicação em Saúde no Brasil. *Revista Cadernos da Pedagogia, São Carlos*, v. 15, n. 31, p. 53-64, 2021.
- SIMMONDS, M.; BURCH, J.; LLEWELLYN, A.; GRIFFITHS, C.; YANG, H.; OWEN, C. et al. The use of measures of obesity in childhood for predicting obesity and the development of obesity-related diseases in adulthood: a systematic review and meta-analysis. *Health Technology Assessment, London*, v. 19, n. 43, p 1-336, 2015.
- SIQUEIRA, A.; S.; E.; SIQUEIRA-FILHO, A. G.; LAND, M. G. P. *Análise do Impacto Econômico das Doenças Cardiovasculares nos Últimos Cinco Anos no Brasil*. *Arquivos Brasileiros de Cardiologia, Rio de Janeiro*, v. 109, n. 1, 39-46, 2017.

VASCONCELOS, W. R. M.; OLIVEIRA-COSTA, M. S. O.; MENDONÇA, A. V. M. *Promoção ou prevenção? Análise das estratégias de*

comunicação do Ministério da Saúde no Brasil de 2006 a 2013. RECIIS, Rio de Janeiro, v. 10, n. 2, p. 1-11, 2016.

Authors' contribution

The author was responsible for all phases of the article's production.

Received: 12/20/2022

Resubmitted: 3/28/2023

Approved: 3/31/2023