WHAT MINISTRIES OF INFORMATION AND COMMUNICATIONS NEED TO KNOW ABOUT NON-COMMUNICABLE DISEASES

A Sectoral Brief for Thailand

Key points

• Non-communicable diseases (NCDs) are a leading cause of illness, premature death and suffering in Thailand.

• The increasing burden of NCDs is linked strongly to global marketing of tobacco, alcohol, and processed foods and beverages high in fat, sugar and/or salt.

• Ministries of information and communications have exceptional reach to promote good health and help people reduce their risk of dying early from a preventable NCD.

• Several strategies are important to get the message across clearly.

What are NCDs and why must government ministries work together?

There are four main NCDs: cardiovascular diseases (which include heart disease and strokes), cancers, diabetes, and chronic respiratory disease. In Thailand, NCDs caused nearly 400,000 deaths, or 74 percent of total deaths in 2016. The major causes of death were cardiovascular diseases, cancer, and diabetes.¹

Most premature NCD deaths (i.e. deaths before the age of 70) are from four main behavioural risk factors – tobacco use, harmful use of alcohol, physical inactivity and unhealthy diet.²
Thailand has the highest level of alcohol use among ASEAN countries, and 27 percent of the population use some form of tobacco, including more than 256,000 children who use tobacco every day. More men and women die of tobacco-related illnesses in Thailand, compared to other middle-income countries.

Only 23.2 percent of youth and children in Thailand meet the recommended minimum physical activity levels, with girls being less physically active than boys. The prevalence of obesity in children rose from 7 percent in 1996 to 10 percent in 2009. Childhood obesity is highest for children at ages 12–14 years (7.2 percent) followed by 1–5 years (4.6 percent) and 6–11 years (3.5 percent).

Population exposure to behavioural risk factors for NCDs is determined largely by policies in trade, education, labour, tax, urban planning and other ‘non-health’ sectors. This means that early death and disability from NCDs could be largely avoidable through better policy coherence across sectors. Given the social, economic and environmental burdens of NCDs, it is possible to identify strategies and approaches that deliver shared gains for all sectors involved.

The tactics of tobacco, alcohol and food companies

Multinational tobacco, alcohol and food companies often seek to increase profits by: (i) expanding their reach into developing countries; (ii) marketing unhealthy products to children; and (iii) funding scientific studies that obscure the links between consuming their products and health. These aims subvert, and are in direct conflict with, national health and development objectives.

Expanding into developing country markets. Asia has more than 30 percent of the world’s smokers, with more than 80 percent of these smokers coming from lower income groups. In Thailand, the male smoking rate is 46.6 percent. Of particular concern is tobacco companies marketing directly to low income groups and women; for the latter using campaigns that associate smoking with independence, glamour, weight control and stress relief. Alcohol companies follow a similar line, and alcohol consumption is rising in developing countries. Unhealthy foods and sugar-sweetened beverages are often marketed as an aspirational lifestyle choice.

Marketing unhealthy products to children. Children are vulnerable and highly susceptible. The tobacco industry targets children and girls. The aim is to ‘hook them young’ so that they are addicted for life. Children are often exposed to multiple advertisements for junk food during prime television hours as well as through magazines, sponsorship of sporting and educational events and increasingly social media, including websites, internet games, email and text messaging.

Obscuring the links between unhealthy products and health. While studies highlight the association between the consumption of sugar-sweetened beverages and obesity, diabetes, and heart disease, the results from industry-funded research are often biased against finding these associations.
1. NCDs are a leading cause of illness, premature death and suffering

- NCDs are the single greatest cause of preventable illness, disability and mortality worldwide. They are responsible for more deaths than all other causes combined.17
- In Thailand, NCDs account for 74 percent of total deaths.18
- NCDs have serious social and economic consequences. They reduce global and national economic output, strain health systems, burden vulnerable households, and hamper progress on the 2030 Agenda for Sustainable Development.19 They are one of the world’s largest drains on economic productivity.
- In Thailand, the economic cost of NCDs was estimated at THB 280 billion in 2013, or 2 percent of GDP, due to premature deaths and loss of productivity among the workforce.20

2. The increasing burden of NCDs is linked strongly to global marketing of tobacco, alcohol, and processed foods and beverages that are high in fat, sugar and/or salt

- Foreign direct investment, trade liberalization and intensive global marketing are resulting in greater consumption of products that harm human health.21 Tobacco (nicotine) and alcohol are both addictive, and taste preferences such as those for sugars actually start in utero and continue to develop through life.22 Their links with illness and early death from NCDs are now confirmed.
- The Thai economic transformation has been accompanied by a change in dietary habits and a marked increase in sugar consumption, which has nearly tripled in Thailand since the early 1980s. There have
also been large increases in the amount of oils and animal protein consumed, and decreases in the consumption of fruit and vegetables.\textsuperscript{23}

- A significant amount of money has been spent on influencing people, including children and adolescents, to consume health-harming products.

- The rise of supermarkets and hypermarkets makes processed foods more affordable and convenient than raw/fresh foods, contributing to the risk of NCDs.\textsuperscript{24}

- The most frequently advertised items on Thai free and digital television were sugar-sweetened drinks and baby milk formulae, respectively.\textsuperscript{25}

- Thailand introduced the new Code of Marketing for Breast-milk Substitutes draft bill in 2016, amidst public debate for its blanket ban on advertisement of these products.\textsuperscript{26}

- Thailand has also enacted the Control of Marketing of Infant and Young Child Food Act of 2017, which prohibits producers, importers or sellers of infant formula milk from advertising food products for children in a way that may cause people to believe they are good for infants.

3. Government agencies responsible for public information and communications have exceptional reach to promote good health and help people reduce their risk of dying early from a preventable NCD

Governments and public bodies have an obligation to protect population health and maximize social and economic development. In Thailand, in addition to health agencies, several government bodies can play a key role in disseminating information and communications to prevent NCDs and promote good health, including the following: the Office of the National Broadcasting and Telecommunications Commission (NBTC), the Public Relations Department, and the Ministry of Digital Economy and Society.

Government bodies responsible for information and communications can protect health by:

- Raising awareness of the NCD epidemic;

- Providing clear information to encourage people to make decisions that will reduce their likelihood of getting NCDs;

- Highlighting industry practices that pursue profit in disregard of consumer health;

- Making full use of (and expanding, where appropriate) regulatory power and statutory authority to limit the advertising, promotion and sponsorship of health-harming products.\textsuperscript{27}
Thailand's 5-Year National NCD Prevention and Control Plan (2017-2021) incorporates a strategy on communicating about NCD risks, including:

- managing communication to the public regarding health promotion and reduction of NCD risks on a continuous basis
- developing networks to transfer knowledge on promoting health and reducing NCD risks
- developing content and increasing communications channels to minimize NCD risks for targeted groups
- monitoring and responding to information which causes NCD-related harm.

The Ministry of Digital Economy and Society, and the Office of The National Broadcasting and Telecommunications are cited as action owners for the development and implementation of these outputs.

Section 32 of the Alcoholic Beverage Control Act in Thailand provides regulation on advertising alcoholic drinks and by showing the names and logos of alcoholic drinks to promote them, in a way to induce others to drink. In 2015, attention was drawn to celebrities posting pictures of themselves with beer on social media. The communication ministries may ensure that these regulations are not breached.

4. Several strategies are important to get the message across clearly

- Ensure messages are geographically and culturally appropriate.
- Focus on the specific diseases. Nearly everyone everywhere has been touched directly or through a loved one by cancer, heart disease, diabetes, hypertension

Specific actions that government bodies responsible for information and communications should consider:

- Support comprehensive bans on advertising of tobacco products and sponsorship from the tobacco industry, in line with the WHO Framework Convention on Tobacco Control.
- Work with policymakers to restrict or ban alcohol advertising, sponsorship and promotions.
- Promote full implementation of the WHO recommendations on the marketing of foods and non-alcoholic beverages to children.
- Help enforce regulatory measures such as the International Code of Marketing of Breast-milk Substitutes and the Control of Marketing of Infant and Young Child Food Act of 2017.
- Undertake and support sustained mass media campaigns that promote the benefits of stopping tobacco use, avoiding harmful use of alcohol, adopting and maintaining a healthy diet and engaging in adequate physical activity.
and associated conditions. Only using the collective term ‘NCDs’ can obscure personal and disease specific experiences.

- Aim to reach lower income populations and those with lower levels of health literacy. Pictorial warnings are helpful. Front-of-pack labelling systems on food packaging can be easily understood (e.g. ‘traffic light’ labelling).

- Never stigmatize. Stigma holds back health and development. Messages should never shame or blame people who consume or are addicted to health-harming products. Notions of personal irresponsibility should be avoided.

- Widen the constituency. NCDs matter not just for health but for wider socioeconomic development including poverty. Engage religious and community leaders. Use workplaces and schools to promote messages.

Advancing action on NCDs through information and communication

- Government bodies responsible for information and communications should:

  - Work with health and other sectors, in particular the education sector, to ensure people have the information needed to protect themselves from tobacco, alcohol and unhealthy foods;

  - Engage civil society and consumer groups and be supportive of their efforts to advocate for regulatory policies, taking careful attention to avoid industry-backed front groups; and

  - Promote whole-of-government NCD responses, recognizing that the power of NCD-related communications is severely limited in the absence of enabling environments that make the healthy choice the easy choice.

- Use powerful messengers. Local celebrities and trusted community leaders can be mobilised to inform people of the risks of NCDs.

- Use social media. People are increasingly getting their information from mobile phones and apps. In particular, use of social media can create opportunities for curbing risk behaviours in youth.

- Harness the voices of youth. Focus on healthy living and challenging corporate misinformation through youth’s idealism, enthusiasm and social media savvy.

In 2009, a survey concluded that Thai nutritional labels on processed food packages were difficult to understand, and since then, the Guideline Daily Amount (GDA), a more evolved front of pack labeling system was introduced. Some food industry organizations are looking to adapt traffic light coded systems for nutrition.

In 2012, Thailand launched a social media campaign “Smoking Kid” on YouTube, highlighting how people respond to children asking for cigarettes. This video is credited with increasing the number of calls to the national tobacco cessation support Quitline.

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Endnotes

1 WHO SEARO. Non communicable diseases, available at http://www.searo.who.int/thailand/areas/ncd/en/


3 Alcohol consumption in Thailand (2014), Thai PBS, 6 January available at http://englishnews.thaipbs.or.th/infographic/alcohol-consumption-thailand/

4 Global Adult Tobacco Survey, GATS (2011)

5 The Tobacco Atlas. Country fact sheet, Thailand

6 ibid


29 Consistent with Article 13 of the World Health Organization Framework Convention on Tobacco Control.

30 Consistent with WHO Global NCD Action Plan 2013-2020

31 As recommended in the final report of the WHO Commission on Ending Childhood Obesity.

32 ibid