Community concern about the sale of high-caffeine drinks to children under 12 years of age: Western Australia population survey results

Christina Mary Pollard A,B,C,D, Xingqiong Meng A,C and Catrina McStay B

ASchool of Public Health, Curtin University, Kent Street, GPO Box U1987, Perth, WA 6845, Australia.
BDepartment of Health in Western Australia, 189 Royal Street, East Perth, WA 6004, Australia.
CThese authors contributed equally to this work.
DCorresponding author. Email: C.Pollard@curtin.edu.au

Received 22 April 2013, accepted 9 July 2013, published online 8 August 2013

In 2001, Food Standards Australia and New Zealand developed a regulatory standard for ‘energy drinks’ (non-alcoholic water-based carbonated beverages containing caffeine, B complex vitamins and other substances), now referred to as formulated caffeinated beverages (FCBs) that was introduced in 2003.1 Standard 2.6.4 protects public health and safety by: (1) controlling the maximum level of caffeine and other substances used in product formulation; (2) requiring labelling statements advising maximum consumption levels; and (3) warning against consumption by children, pregnant and lactating women and caffeine-sensitive people.2 During the development of the Standard, there was significant community concern in relation to potential access to caffeinated beverages by children.3 There was also concern about the potential to carry over fortification from FCBs to other products because FCBs were proposed to be used as ingredients in other beverages commonly consumed by children, such as soft drinks. The Standard aims to limit the availability, appeal, marketing and promotion of FCBs to children, and labels include a statement outlining that authorities recommend limiting caffeine intake. Almost a decade later, in response to continued health concerns, with the increasing number and types of foods on the market containing caffeine and the higher amounts of caffeine in foods, Governments continually monitor public attitudes towards food and nutrition to inform a range of regulatory and policy interventions to assist the public to protect health and safety. This letter reports on the level of community concern among Western Australian (WA) adults regarding the sale of caffeinated beverages to children under 12 years of age. Data were pooled from three Nutrition Monitoring Survey Series (NMSS) telephone surveys of 3196 WA adults aged 18–64 years collected in 2001, 2009 and 2012, with response rates of 33%, 88% and 90%, respectively. The lower response rate in 2001 is most likely due to the random digit dialling methods used compared with the numbers selected by electronic White Pages in 2009 and 2012. The pooled data were weighted to account for sample design and adjusted for age, sex and geographic area to a single population to allow for comparisons over time. The standard population used was the 2006 Estimated Resident Population of Western Australia6 because it was the most recent census year. Descriptive analysis was conducted using survey module of STATA 12 SE 12.0 (StataCorp LP, College Station, TX, USA).

### Table 1. Proportion of people who rated concern about the sale of high-caffeine drinks to children 12 years as ‘quite’ or ‘very concerned’, Nutrition Monitoring Survey Series 2001, 2009 and 2012, Western Australia (n = 3196)

<table>
<thead>
<tr>
<th>Concern rating</th>
<th>2001</th>
<th>Nutrition Monitoring Survey Series</th>
<th>2009</th>
<th>2012</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not very</td>
<td>11.4% (9.4%, 13.7%)</td>
<td>5.8% (4.2%, 8.1%)</td>
<td>2.8% (1.6%, 4.8%)</td>
<td>8.0% (6.8%, 9.3%)</td>
<td></td>
</tr>
<tr>
<td>Quite concerned</td>
<td>26.6% (23.8%, 29.7%)</td>
<td>16.2% (13.9%, 18.9%)</td>
<td>10.5% (8.3%, 13.2%)</td>
<td>20.2% (18.6%, 22.0%)</td>
<td></td>
</tr>
<tr>
<td>Very concerned</td>
<td>59.2% (55.9%, 62.3%)</td>
<td>68.9% (65.7%, 72.0%)</td>
<td>78.9% (75.1%, 82.2%)</td>
<td>66.1% (64.1%, 68.0%)</td>
<td></td>
</tr>
<tr>
<td>Don’t know</td>
<td>2.8% (1.9%, 4.1%)</td>
<td>0.6% (0.3%, 1.3%)</td>
<td>0.6% (0.2%, 1.4%)</td>
<td>1.7% (1.2%, 2.3%)</td>
<td></td>
</tr>
</tbody>
</table>

Data show the percentage of respondents in each group, with 95% confidence intervals given in parentheses.
By 2012, there was a significant increase in the proportion of people who said they were “very concerned” about the sale of caffeinated beverages to children 12 years of age or younger compared with 2001 (79% in 2012 vs 69% in 2009 and 59% in 2001). Correspondingly, the proportion of people who were not very concerned has decreased has from 11% in 2001 to 6% in 2009 and only 3% in 2012 (Table 1).

Community concern remains high and is increasing. It is important that governments continue to control and regulate caffeinated beverages, their labelling, promotion and advertising and, in particular, promotion and availability to children.

Acknowledgements

The Department of Health in Western Australia has conducted the NMSS since 1995. Healthway funded Curtin University’s Food Law, Policy and Communications to Improve Public Health Project to assist the translation of research into practice.

References


