How does health policy affect practice at a sport mega event? A study of policy, food and drink at Euro 2016

This item was submitted to Loughborough University's Institutional Repository by the/an author.


Additional Information:

- This is an Accepted Manuscript of an article published by Taylor & Francis in International Journal of Sport Policy and Politics on 4 September 2017, available online: http://www.tandfonline.com/10.1080/19406940.2017.1372793.

Metadata Record: https://dspace.lboro.ac.uk/2134/25977

Version: Accepted for publication

Publisher: © Taylor and Francis

Rights: This work is made available according to the conditions of the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International (CC BY-NC-ND 4.0) licence. Full details of this licence are available at: https://creativecommons.org/licenses/by-nc-nd/4.0/

Please cite the published version.
How does health policy affect practice at a sport mega event? A study of policy, food and drink at Euro 2016

Manuscript type: Original Research

Dr Joe Piggin
School of Sport, Exercise and Health Sciences
Loughborough University
Loughborough
Leicestershire
LE11 3TU
United Kingdom
0044 01509226377
j.j.piggin@lboro.ac.uk

Dr Haifa Tlili
Postdoctoral Researcher
Paris Descartes University, France
tlilihaifa1@gmail.com

Bruno Henrique Louzada
PhD Researcher
University of Lyon, France
bhlouzada@yahoo.com
Abstract

From a public health perspective, there are growing concerns about the commercial arrangements between sports events and companies which sell ultra-processed food and drink. In particular, companies are accused of connecting products that are perceived as unhealthy with sport and physical activity that is perceived as healthy. This study examined the tensions and conflicts between health promotion policy and the marketing and consumption reality at the 2016 European Championship football tournament in France. This study is informed theoretically by a critical, political economy lens. Discourse analysis, semiotic analysis, venue analysis and participant observation were employed to gather data from relevant policy and event management plans, sponsor advertisements, site architecture, food and drink offerings and displays at stadia and fan zones. These sources were assessed for the way they encouraged healthy or unhealthy consumption behaviours. The analysis found that the health advice promoted by the French government and the tournament owners (UEFA) differed markedly from the reality at the points of consumption. Unhealthy products dominated inside the stadia and fan zones sampled. In many instances there were little or no healthy foods on display for customers. Despite a self-proclaimed status as having ‘healthy stadia’, a limited vision of health at Euro 2016 was promoted, which was largely restricted to the attempted provision of smoke-free spaces. This raises questions for sport mega-events which are in receipt of public funding and which claim to promote health. This study encourages policy makers, sports funders and consumers to critically evaluate health claims made by sport events and sponsors.
Introduction - The nutrition, health and sport nexus

A variety of powerful actors disseminate ideas about food, drink and healthy eating. The World Health Organisation, national governments and corporations all promote guidelines and advice about healthy eating. Governing bodies of sport are also known to espouse health messages. Relatedly, there has been a recent global expansion and intensification of concern about the deleterious effects of various processed foods and drinks. The development of food science, the emergence of pressure groups, and changing societal attitudes to health all present challenges to food and drink companies. At the same time, many sport mega events (SMEs) have significant financial relationships with food and drink companies. These SMEs proclaim (and are framed by others) as being able to promote healthy behaviours (IOC 2010, FIFA 2015). Therefore, the policies which inform SMEs, the production politics of SME sponsorship campaigns and the corporate strategies used to leverage sponsorship contracts deserve critical scrutiny. In the Global North, critiques of food and drink sponsorships form part of a wider critique of the power and influence of corporate power, including debate around corporate involvement with research (O'Connor 2015), health warnings on products (Moodie et al. 2013), and taxation of corporations (Watts et al. 2014).

The sports industries have traditionally been relatively immune from specific regulation with regard to food and drink promotion, with voluntary arrangements being popular. For example, in the United Kingdom (UK) major food and drink companies have in recent years become ‘partners’ with the Government to promote physical activity and sport participation (UK Government 2015). Self-regulation is also employed by companies. For example, Coca Cola claims that the company does not market any products directly to children under 12 (Coca Cola 2016). However, SMEs seem to fall outside of these voluntary guidelines, with sponsors’ high sugar brands appearing ubiquitous at many events. At the same time, it is apparent SME organisers are proactively utilising discourses of health and sustainability to market their events.

Literature review: The contested terrain of food and drink at sports events
While much research exists around enhancing service quality at sport events (Theodorakis et al. 2013) and the effectiveness of sponsorship campaigns (Kim et al. 2015), until recently there has been a dearth of research examining problematic aspects of food and drink industry involvement (Carter et al. 2013, Cade et al. 2017). This is also the case in sport management literature. Henderson (2009) noted that sport management literature ‘has been primarily concerned with topics related to sports as spectatorship or entertainment and not sports as opportunities to engage mass participation in active behaviours that can lead to better health’ (p. 58). Only recently has research explicitly focused on football in particular (Parnell & Pringle 2016). With growing concerns about the deleterious effects of poor quality nutrition and the ubiquity of food sponsors at sports mega events, it is clear that the public health consequences of sports extend beyond claims that events inspire young people to participate in sport. It appears that interest is increasing in the sport management discipline, whereby practitioners and researchers alike are attending not only to ideas about customer satisfaction, but also the more subtle, though no less important health concerns.

Broader health literature has critiqued relationships between food and drink companies and sport events which are increasingly seen as problematic due to the perception that the food and drinks products being endorsed are not healthy (Bragg et al. 2013, Harris et al. 2009). Carter et al. (2013) note that ‘the sponsorship relationships between sporting organisations and food and beverage brands and companies do not always reinforce either sports-related or more general nutrition recommendations’ (p. 2). When energy-dense, nutrient-poor food companies endorse events, teams and athletes, this can imply that consumption of these foods is commensurate with success and sport and ‘health’ ideals often espoused by the athletes involved. Ireland and Watkins (2009) exemplified the potential harmful implications of such promotion for children:

‘Of key concern are the contradicting messages children receive. In school, the emphasis is on healthy eating, but in our football clubs – which remain possibly the biggest sporting influence on the lives of young people – the culture is anything but healthy as fans continue to consume fizzy drinks, burgers and hot dogs.’ (p. 686)

Pettigrew’s et al. (2012) research supported the argument that sports sponsorship by alcohol and fast food companies can effectively reach child audiences. In an
Australian study, Kelly et al. (2012) found that three-quarters of parents sampled supported policies to restrict unhealthy food, beverage and alcohol sponsorship of children’s and elite sports. Smith’s et al. (2014) New Zealand study concluded that public health mechanisms, such as healthy food and beverage policies and widely promoting water as the beverage of choice in sport should form part of a comprehensive public health approach to reduce the substantial, unnecessary and potentially harmful effects of sugar-sweetened beverages. Similarly, Lindsay et al. (2013) claimed that sport is increasingly used as a vehicle for the promotion of a range of ‘risky consumption’ products, raising important ethical and health policy questions. Specifically, they call for researchers and policymakers to consider strategies to encourage and incentivise sporting codes to shift their sponsorship alliances to healthier organisations.

Various studies suggest marketing can have powerful effects on consumer behaviour. Carter et al. (2011) claimed that sport sponsorship can influence children’s attitudes and behaviour. Research has also shown that tobacco sponsorship can increase children’s brand recognition and likelihood of consumption (Ledwith 1984, Crompton 1993, Valdya et al. 1996). Other research has suggested a link between alcohol advertising and young people having more favourable attitudes towards drinking alcohol (Hastings et al. 2005).

While potential harmful physiological effects might come from consumption of various products, health goals must also be contextualised with traditional practices at stadia. Ramshaw (2016) acknowledges the rituals of sports fans often involve consuming large quantities of unhealthy foods. ‘Tailgating’ for example is a significant sporting tradition associated with college and professional football in the United States where fans often drink alcohol outside venues before the event. Gee et al. (2013) investigated the culture of alcohol consumption at the Rugby World Cup and found that corporate messaging was so prevalent that all spectators were exposed to alcohol symbols, alcohol consumption and promotions. They concluded by discussing the perception of an entrenched, naturalised culture of alcohol promotion and consumption at some sports events in New Zealand.

Ireland and Watkins’ (2009) research highlighted desires amongst consumers for healthier food options at the stadium and point to the potential of stadia to be healthy settings supporting healthier food choices. Drygas et al. (2013) wrote that:
Unfortunately sports stadia and the clubs they host are, rarely perceived as places that promote healthy lifestyles. Fast food, alcohol and tobacco are commonly advertised, served and consumed during sports games giving the spectators and TV fans contradictory messages concerning healthy choices. (p. 1)

A 2008 study by Drygas et al. (2013) in 10 European countries revealed that only 16 out of 88 stadia had developed a healthy eating policy. 56% of representatives from sports stadia, sports governing bodies and collaborative partners surveyed believed that subcontracting arrangements of food outlets within stadia meant they had very little control or influence on what was sold. In a study of perceptions of food at rugby matches, Parry et al. (2016) found that while food and drink were a point of dissatisfaction for consumers, the price and service quality were of greater concern than the products’ healthiness. It appears practices might be slowly changing. Recently Parnell et al. (2016) noted that there is now more focus on the realm of stadium management, and specifically, how sports stadia can provide a setting to deliver on public health outcomes.

Given increasing criticism of unhealthy food promotion, the purpose of this study was to conduct an analysis of the ways in which health promotion manifested at the Euro 2016 football tournament. This study aimed to: (i) identify the influential policies and health discourses at Euro 2016, (ii) examine the types of marketing strategies deployed by food and drink companies that sponsored Euro 2016, and (iii) compare and contrast discourses in health policy and guidelines with the site architecture, marketing and products available at the various event sites.

**Research Context**

The 2016 European Football Championships (henceforth Euro 2016) were hosted in France between June and July that year. The event involved 24 national teams in 51 games which took place at 10 host venues around France. Close to 50,000 people attended each match, with many more spectators attending licensed ‘Fan Zones’ around Europe. The matches were broadcast on many channels and websites around the world, with UEFA estimating that over the month-long event, more than 2 billion viewers would be involved. The final match was estimated to be watched by more than 300 million people (2016a). UEFA suggested that more than
€400M would be invested in the tournament by sponsors (UEFA, 2016b). Despite being hosted at a time of significant security risk in France (due to recent terror attacks), and despite some fan violence both in public spaces and inside stadia, the event was generally considered a success.

The health policy milieu in which Euro 2016 was situated involved a number of different organisations with varying degrees of regulatory authority. It involved a number of different organisations which do not necessarily have direct influence over one another. Instead, various policies co-exist virtually independent of one another, and show how sports events are being shaped by competing forces. While perceived unhealthy sponsorships are ubiquitous, health lobbyists are trying in different ways to affect what is promoted and sold at sports events.

In 2016, the World Health Organisation (WHO) was particularly concerned about the perceived insufficient traction on the regulation of unhealthy foods promotion:

‘Settings where children and adolescents gather (such as schools and sports facilities or events) … should be free of marketing of unhealthy foods and sugar-sweetened beverages. The Commission notes with concern the failure [to implement recommendations] …. and requests that [Member states] address this issue’ (WHO 2016).

At a national level in France, since 2001, various campaigns such as the French National Nutrition and Health Programme (PNNS) have focused on food and the fight against physical inactivity. Health messages have included slogans such as ‘Eat Move’, ‘Moving is health’, Health is moving’, ‘Eat five fruits and vegetables a day’, ‘Do not eat too much fat, too much sweet, too much salt’ (Chauliac 2014). The National Institute for Prevention and Health Education (INPES) has supported these campaigns to strengthen implementation. These campaigns often include messages which only appear briefly on advertisements without changing the fundamental elements of the food environment, or supporting young people in their behaviour change.

French law also informed how Euro 2016 was staged. The Evin Law (1991) stipulates that the sale and distribution of alcohol ‘is prohibited in stadiums, in physical education halls, gymnasia and, in general, in all institutions of sport and physical activity.’ However, Euro 2016 was permitted to sell Carlsberg beer in fan zones and stadiums.
What counts as healthy food and drink?

There is ongoing debate about when and whether to call certain foods and drinks ‘unhealthy’. In New Zealand for example, the Food and Beverage Classification System Nutrient Framework for Schools (New Zealand Heart Foundation) (2013) separates foods into ‘everyday, sometimes and occasional foods’, thereby avoiding the term ‘unhealthy’. However, the term ‘unhealthy’ is prevalent in sport event evaluation literature. For example, Inoue et al. (2015) discuss ‘Event’s impact on unhealthy habits and practices … [and] consumption of unhealthy foods’ (p. 712 italics added). In their systematic review, 16 of 20 studies found that sport spectatorship would increase personal engagement in a variety of unhealthy habits and practices. We also note Carter’s et al. (2013) research involved nutrient composition of various foods using categories whereby ‘foods … classified as healthy met all aspects of each criterion. Foods with nutrient content exceeding any aspect of the criteria were classified as unhealthy’ (p. 3). We argue here therefore, that when considering the nutritional value of various foods and drinks, the term ‘healthy’ is inherently political. For this study then, we consider the claims by UEFA of their stadia being ‘healthy’, and argue that such a claim necessarily allows for the possibility of stadia and products within them being ‘unhealthy’.

Theory and Method

This study is informed theoretically by a critical approach to public health. In particular, a political economy lens is used to question the ways in which citizens and consumers are encouraged to think about health. This viewpoint acknowledges that some actors (such as corporations) have significant lobbying and decision making power regarding ideas about health, wellbeing, nutrition and physical activity. Because ‘health’ is such a multi-faceted concept, we focused specifically on texts which involved ideas about healthy eating. This analysis could be best described as a critical translation analysis, whereby the researchers traced how ideas moved from policy and strategy documents into the practical realities of the event itself. We sought to compare the ideas espoused in policy with what consumers experienced in the event settings with regard to ideas about health, food and drink.
The method incorporates a variety of techniques and draws together ideas about public health policy, marketing, nutrition and event management. Four facets (policy, marketing material, event sites, and the products offered for sale) are woven together to examine how health was promoted at Euro 2016. Various aspects of each facet were interrogated, with full details provided in Table 1. First, public policy ideas around agenda setting and discourse analysis were used to consider policy and strategy of the organisations involved (Piggin 2013). Attention was paid to the dominant forms of knowledge (discourses) espoused about healthy eating. These documents were gathered though a conceptual sweep of policy documents which the researchers believed would be relevant. These included the World Health Organisation, the French Ministry of Health, the French Ministry of Urban Affairs, Youth and Sport; the Union of European Football Associations (UEFA), and the European Healthy Stadium Network (EHSN). Second, marketing and strategy documents of sponsors were analysed. The policy and marketing documents were read critically in relation to how health was framed and what practical advice was offered. Two policies in particular were contrasted with the observed reality of the event sites; the European Healthy Stadia Network Guidelines and the French Ministry of Health’s Manger Bouger (Eat Move) guidelines. Third, event immersion and participant observation at various tournament sites was employed to understand the physical manifestations of, and dynamics involved in, the actual events. Semiotic analysis was also used to analyse the event marketing and production at the various event sites. Semiotic analysis examines the construction and interpretation of imagery and rhetoric (Goldman 1996). This was used for analysing marketing material, since such texts are specifically designed to persuade through creative displays of symbolism, rhetoric and imagery. Fourth, comparisons were made between food and drink messages in policy and advice, and the products and practices at the various events sites. Specifically, this analysis involved considering prominent concerns as to what counts as healthy food and drink, how much should be consumed, and its availability and display. This study purposefully did not conduct in-depth micro-nutrient analysis, instead using WHO organisation guidelines as a basis for analysis. By doing so, this allowed the researchers to analyse the event from the viewpoint of consumers, absorbing information which was presented to them through advertising, point of sale situations and event sites. Ethical clearance
was obtained from Loughborough University’s School of Sport, Exercise and Health Sciences.

<table>
<thead>
<tr>
<th>Data</th>
<th>Method and texts / sites</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Policy and guidelines</strong></td>
<td>Critical discourse analysis of:</td>
</tr>
<tr>
<td></td>
<td>France 2012 Plan national sport santé bien-être.</td>
</tr>
<tr>
<td></td>
<td>WHO 2004 Global Strategy on Diet, Physical Activity and Health</td>
</tr>
<tr>
<td></td>
<td>WHO 2015 Guideline: Sugars intake for adults and children</td>
</tr>
<tr>
<td></td>
<td>UEFA 2015 Social Responsibility and Sustainability One-year-to-go report</td>
</tr>
<tr>
<td></td>
<td>European Healthy Stadia Network 2015 Guidelines</td>
</tr>
<tr>
<td></td>
<td>France Manger Bouger (Eat Move) 2016 health campaign</td>
</tr>
<tr>
<td><strong>Marketing material of Euro 2016 sponsors</strong></td>
<td>Critical assessment and semiotic analysis of:</td>
</tr>
<tr>
<td></td>
<td>Public spaces (eg: billboards during the event),</td>
</tr>
<tr>
<td></td>
<td>Event locations (during the event)</td>
</tr>
<tr>
<td></td>
<td>Online material (before and during the event).</td>
</tr>
<tr>
<td></td>
<td>Coca Cola, McDonald’s and Carlsberg were the main nutrition-related sponsors.</td>
</tr>
<tr>
<td><strong>Event sites</strong></td>
<td>Venue analysis and participant observation of:</td>
</tr>
<tr>
<td></td>
<td>Stadia:</td>
</tr>
<tr>
<td></td>
<td>Parc des Princes, Paris, France</td>
</tr>
<tr>
<td></td>
<td>Stade de France, Paris, France</td>
</tr>
<tr>
<td></td>
<td>Fan Zones:</td>
</tr>
<tr>
<td></td>
<td>Paris Fan Zone, France</td>
</tr>
<tr>
<td></td>
<td>Oslo Fan Zone, Norway</td>
</tr>
<tr>
<td><strong>Food and drink sold at venues</strong></td>
<td>Factual information analysis of:</td>
</tr>
<tr>
<td></td>
<td>Portion sizes, cost, range of products</td>
</tr>
</tbody>
</table>

Table 1: Sites and methods of data collection

The researchers used a combination of random, convenient and purposive sampling. Three authors (one of whom is French) immersed themselves in the tournament with visits to two Paris stadiums and two fan zones. The researchers undertook participant observation at the various events sites, taking field notes and photographs of the venues. This involved engaging in points of sale of various food and drink outlets. Photographs were taken of the food and drink marketing and provision, in those sections of the stadium which tickets allowed the researchers access to as spectators. Food and drink products and brands which made reference to the tournament were also analysed. All sites and texts were subjected to critical analysis, by considering their intended messages, accuracy and how in/consistent they were in relation to other texts. The analysis of texts and sources was guided by an underlying assumption of critiquing the interests of those who produced it (in line
with a political economy approach). In order to examine the movement of ideas from policy into practice, various questions were asked of each setting. These guiding questions are outlined in Table 2:

<table>
<thead>
<tr>
<th>Site</th>
<th>Guiding Questions</th>
</tr>
</thead>
</table>
| **Policy and strategy**     | What were the major concerns of the policy or strategy?  
To what extent was health promoted?  
To what extent were rules or inducements deployed to change behaviour? |
| **Media and advertisements**| Were sponsors’ ads used to promote the event / health?  
Were tactics were used by companies to connect consumption of products with health promotion? If so, what was involved?  
What ideas about health were presented by food and drink sponsors? |
| **Event sites**             | To what extent was health promoted through links with food and drink? How was this accomplished?  
What media were used to transmit these values and ideas?  
What techniques, strategies and manifestations were employed to disseminate these messages? (eg: style, emotion, spokespeople, etc)  
To what extent did event sites make healthy food and drink accessible, convenient and affordable? |

**Table 2: Guiding Questions for Analysis**

The authors used these questions to refine and distil what they concluded were the most important issues regarding health promotion at Euro 2016. What follows is a synthesis of the four research facets mentioned above. The researchers were conscious of the multi-dimensionality of ‘health’. Therefore, the analysis focuses on the promotion and sale of energy dense, low-nutrient foods, which are a source of contention for their associations with poor health. This is done by presenting a purposefully contradictory narrative which compares and contrasts health policy rhetoric with practical realities at Euro 2016.

**Analysis**

*UEFA and Euro 2016 – A partial conception of health*

The European Union of Football Associations (UEFA) ‘committed to develop an innovative and pragmatic approach to social responsibility and sustainability’ at Euro
UEFA professed a ‘commitment to promoting healthy lifestyles and a safe and sustainable environment through football’ (UEFA 2015b). Another apparently influential organisation was the European Healthy Stadia Network (EHSN), a network of more than 150 stadia advocating on issues related to sport and health. Despite a close connection between UEFA and the EHSN, the ‘healthy stadium’ discourse at Euro 2016 involved very limited attention to healthy food and drink promotion in policy. Instead the main emphasis by UEFA was to limit places to smoke cigarettes (UEFA 2015b). Indeed, the Euro 2016 Social Responsibility and Sustainability Policy (UEFA, 2016a) made no mention of food, nutrition or physical activity. The only mention of ‘health’ was with regard to holding a ‘tobacco-free tournament’. While being a worthy goal, the distinct lack of attention to healthful food environments appears to be a significant omission, particularly for a tournament sponsored so heavily by food and drink companies such as Coca Cola, McDonald’s and Carlsberg.

UEFA’s policy focuses on environmental impact; economic benefits derived from the event; and a sustainable social dimension (UEFA 2016a). According to UEFA, their strategy is derived, in turn, from ISO 20121, an ‘event management system standard’. ISO 20121 (2016) defines sustainability in a particular way, with an emphasis on ‘commercial success’:

There is much confusion about what the term sustainability actually means. The important point to note is that sustainability is not just about being ‘green’ and more environmentally responsible – it is more encompassing than that. In a nutshell, sustainability is about how an organisation continues to run its activities in a commercially successful way whilst contributing towards a stronger and more just society and reducing its impact on the environment. (ISO 2016)

The profit motive was clearly of great importance for these event organisers. Therefore there is a tension between the WHO guidance discussed earlier regarding the harmful effects of energy dense but nutrient-poor products, and event organisers’ hopes for commercial success. UEFA also made reference to the Global Reporting Initiative (GRI). In turn, the GRI document includes reference to ‘Sector Disclosures’, which lists a vast array of factors that should be attended to during the hosting of events. The GRI recommends reporting ‘Customer wellbeing’ at events. According to this report, ‘customer wellbeing includes, but goes beyond, health and safety’ and
includes ‘customer satisfaction and happiness’ (2013, p. 45). It is this logic which healthy eating campaigners often problematize, since advertising often emphasises the pleasure of consumption, omitting potential unhealthful outcomes. It is clear then, that while health concerns do feature in the guidance, there is also conflation of health and wellbeing.

The space for Euro 2016 organisers to mix specific health guidelines with more intangible ideas about satisfaction is created through the assertions of following ‘regulations and voluntary codes concerning the health and safety of products and services’ (p. 46 italics added). Given that there are no specific regulations about what food or drink can be characterised as ‘healthy’, tournament organisers are at liberty to select which products feature in the confines of the event sites. While the Sector Disclosures do recommend that event organisers ‘report systems used to guarantee health, safety and security of food and beverage provision’ (p. 71 italics added), no discussion is given regarding how health of food and drink can be guaranteed. Health is indeed such an abstract concept that providing no one feels seriously ill after consuming event site products, it is plausible that this is not a concern for event organisers. Indeed public health advocates warn against the long term (not short term) consequences of unhealthy food consumption.

The de-prioritisation of healthy eating goals can also be witnessed through imagery in UEFA’s ‘One Year to Go’ report in 2015. One illustration shows various aspects such as ‘accommodation, transport and food and drink’ with an arrow pointing towards the term ‘human health’ (UEFA 2015a, p. 15). That is, various elements are positioned unquestioned as positively associated with ‘health’, despite no direct or explicit link between the different elements.

Other aspects of health were prominent in UEFA literature. In much UEFA marketing, the phrase ‘Respect Your Health’ was promoted. However, this only appeared in relation to ‘tobacco-free environments’ (2015a, p. 16). This rhetorical technique could be described as an example of synecdoche – where the entire concept (health) is represented by only one of its parts (tobacco free environments). In such a case, the provision of a ‘typical’ example is used to generalise about the concept. We argue here that emphasising ‘Respect Your Health’ in smoke-free spaces at stadia and transport sites elides the equally problematic health outcomes that are linked to consumption of ultra-processed foods and drinks. UEFA’s ‘One Year To Go’ report included a section on ‘Improvements to Make’ (p, 16). The fourth
and final point was the need for ‘Additional action in support of healthier lifestyles, in particular healthier catering options’. Therefore it is clear there was an awareness of the potential for harm to be caused by the selling of particular food and drink. However, as will be seen later in the analysis, healthier catering options were mostly absent.

*The European Healthy Stadium Network and Manger Bouger advice*

Healthy eating and physical activity promotion does feature in UEFA’s (as distinct from Euro 2016’s) website and document about social responsibility. In the section on ‘Social Responsibility’ and ‘Health’, UEFA stated a commitment to ‘promoting healthy and active lifestyles, encouraging people of all ages throughout Europe to take up physical activity (be it football, or otherwise) and to eat good, balanced diets’ (2016c). However, with regard to the Euro 2016 tournament itself, there were distinctly little (and often no) health advice or reminders of the importance of healthy eating, especially in the stadiums. In fact, it was readily apparent that much of the food and drink offered in and around the stadiums and fan zones was typical of those criticised by health lobby groups as being unhealthy.

While UEFA and Euro 2016 prominently displayed the European ‘Healthy Stadia’ Network logo on their respective websites, there was a distinct absence of attention to healthy eating during the tournament. UEFA had earlier endorsed a guidebook called ‘Healthy Heart Activities for Football: Guidance Toolkit’ (EHSN 2015). One section is devoted to ‘Healthier Catering Options at Stadia’ and includes an image of a child choosing between an ostensibly healthy apple in one hand and an unhealthy burger in the other. The image connotes the consumer making a health conscious decision. The accompanying text encourages the reader (the stadium operator) to make healthy options available to consumers. This is done through advice on ‘Using Less Salt in Catering, Healthier Cooking methods, Reformulation Tips, Portion Control, Healthier Menu Alternatives, Healthier Meals / Snacks / Drinks’ (pp. 9-11, italics added). The booklet claims that:

‘In addition to promoting a balanced diet to fans, football clubs and stadium operators can also help to create heart healthy match-day environments through simple changes to the catering options available at their stadium. Football clubs have a lot to gain from encouraging healthier eating at their
stadium, including increased revenue streams, healthier fans and a healthier workforce who take less sick leave.’ (p. 9)

Various ideas are then suggested regarding the provision of healthier food and drink options. The following section compares and contrasts the various ideas promoted in ‘Healthy Heart Activities for Football: Guidance Toolkit’ (EHSN, 2015) and ‘Manger Bouger’ (a French Ministry of Health nutrition and physical activity campaign endorsed by two of the most prominent Euro 2016 food and drink sponsors, Coca Cola and McDonald’s), with the evidence gathered from various Euro 2016 sites. We use both of these sources because the EHSN guidelines are targeted at stadia operators while Manger Bouger is aimed at French residents (who made up a significant proportion of the Euro 2016 spectators). By comparing and contrasting, we aim to test assumptions about health promotion rhetoric at Euro 2016.

The rhetoric versus reality of healthy stadia

This section compares advice from the European Healthy Stadia Network (EHSN) and the Manger Bouger health promotion campaign (France Ministry of Health 2015) with the researchers’ observations at various event sites.

1) ‘Meat: Use less meat with more vegetables and legumes such as beans, peas and lentils in meals i.e. in stews, casseroles or soups. Using less meat can significantly reduce the saturated fat content … Try to develop options such as pre-prepared pasta pots and salad pots, stews, lean meat and vegetable kebabs, casseroles or chunky vegetable soups as good alternatives to high fat options such as burgers, pies and pasties’ (EHSN 2015).

Researchers’ observations: Burgers, hot dogs and products with high meat content were very popular across all sites. The Paris Fan Zone featured a McDonald’s restaurant which sold the traditional array of burgers. In many public spaces, billboards promoted a 10 Euro bucket of fried chicken from KFC, a fast food restaurant which sponsored the French football team. The Fan Zone in Oslo specifically marketed predominantly meat products. Meat-free options were available at various stalls, usually in the form of tomato and mozzarella sandwiches.
2) ‘Healthier Drinks: Offer bottled water and/or provision of free tap water … Offer low sugar or diet carbonated drinks … Offer no added sugar fruit juices - contributing to five a day’ (EHSN 2015).

‘Sugary drinks. Be careful in your choice of beverages. Some sugary drinks like sodas, provide what are called empty calories: lots of calories from sugar and no nutrients’ (France Ministry of Health 2015).

Researchers’ observations: There were no obvious free water stations for consumers at stadia. Neither the stadia or fan zones overtly promoted free tap water. The pricing of bottled water at the same rate as Coca Cola and Powerade did not align with the healthy eating guidelines of the European Healthy Stadia Network. The clear majority of drinks at the two stadia examined were high in sugar content. Signage of Coca Cola dominated stalls and emphasised drinks with high sugar content. Low alcohol beer was served. While low sugar options such as Coke Zero were displayed, the vast majority of shelf space was given to regular Coca Cola and other sugary drinks. The signage around the counters was most often adorned with Coca Cola logos. There were mobile Coca Cola dispensaries at both stadia. Video screens played ads with Coca Cola products and logos flashing. Bottled water was priced the same as drinks with high sugar content. At the Parc des Princes and the Stade de France, Powerade was on sale, despite it ostensibly being a drink designed for endurance athletes.

3) ‘Promoting Healthier Options: Where possible sell the healthier food / meals at a lower cost to the less healthy alternative … to encourage increased sales of healthier food items. … If clubs do not take [price and promotion] into account, then it is less likely that healthier foods will sell adequately enough to sustain them as a viable option’ (EHSN 2015).

Researchers’ observations: There were no obvious differences in most menus. At the Parc des Princes and the Stade de France, as well as the two Fan Zones, menus often did not have a distinctly healthy option. For example, the following items were for sale as snack options: Crisps €3, Popcorn €3.50, Brownie €3, Muffin €3, Candies €3. There was no clear demarcation about which option was healthy, if any, and no particular price differentiation. A menu inside the Stade de France which was typical of menus around the sites included a hot dog, ham and cheese sandwich, tuna sandwich, chicken sandwich and tomato and mozzarella sandwich all which
cost €6. Again there was no distinction about which offerings were healthier than others, not any distinction in price. There were often no instances of products with a high fruit or vegetable content available.

4) ‘Display of food and drink: At food kiosks and counters, ensure that fruit and healthier snacks are at the front of counters, whilst try to highlight the availability of healthier options on any menu boards or posters near to or part of kiosks’ (EHSN 2015).

Sweet products: ‘Limit! Consumed occasionally and in reasonable quantities, sugary products are compatible with a good nutritional balance: jam on toast for breakfast, some biscuits for tea, etc. … they are high in calories and can contribute to weight gain and development of diabetes when consumed in excess’ (France Ministry of Health 2015).

Researchers’ observations: Food outlets at both stadia and both Fan Zones were dominated by processed high-sugar foods. These included packets of confectionery, brownies and cookies. Most apparent were the wide array of sugary drinks on sale. There was a distinct absence of fruit and healthy snacks. Menu boards and posters were dominated by these same products. Some of the major billboards around Paris promoting Coca Cola included the phrase ‘Pour votre santé, pratiquez une activite physique reguliere’ (For your health, be physically active regularly). Similarly a KFC billboard encouraged eating 5 fruits and vegetables per day for your health in small print. On Coca Cola’s French website, physical health was promoted with the quote in small letters at the bottom of the page ‘Pour votre santé, évitez de grignoter entre les repas’ (For your health, avoid snacking between meals). Avoiding snacking between meals, could be construed as arguing against the consumption seen in the ads, since the ads do not connote consumption of Coke at meal times. Further, the advice from the WHO is to ‘eat fresh fruits and raw vegetables as snacks’, as opposed to avoiding snacking altogether. These messages (in a small text at the bottom of the display) have the unintended effect of appearing as ‘warning signals’, in the same way in which cigarette packets are required to explain that smoking is harmful, since the message has no apparent link to the main imagery in the ads.
5) ‘Stock: Ensure that popular healthier food items are restocked at all times so that a healthier choice is always available’ (EHSN 2015).

Researchers’ observations: Given that there were no discernible or distinct defined ‘healthy’ products, this suggestion did not appear to be applicable in various venues. According to UEFA, the main reason for banning smoking in the stadium was to protect fans from the effects of smoke, which is a ‘direct cause of disease, disability and death and to set an example to young people by holding an event that promotes health and fun for everyone’ (EFE 2016). It is seemingly incongruous then, that energy-dense, nutrient-poor food and drink dominated the Euro 2016 event sites.

What these examples show is a significant disjunction between many of the best practice guidelines of the European Healthy Stadium Network and Manger Bouger, and the practical realities of Euro 2016 food and drink operations.

Discussion

Debates about food and drink sponsorship at sports events are becoming more prominent due to perceived deleterious health consequences associated with the products involved. This study examined the dynamics involved in translating health policy into marketing and practice at sports events. From the evidence Euro 2016 promoted a partial and obfuscated view of health, which focused on smoke-free environments rather than the promotion, display and sale of healthy food products. Event sites actively encouraged consumption of ultra-processed products high in sugar, low in fruit and vegetable content, and did not explicitly promote healthier options. Therefore, Euro 2016 cannot be described as a tournament that encouraged holistic healthy behaviour. UEFA’s policy rhetoric of ‘Respect Your Health’ was not supported by stadium and advertising practices which encouraged consumption of energy-dense but nutrient-poor food and drink.

The strength of this type of intertextual critical evaluation is that it is unrelated to proclamations of the ‘success’ of the event. It purposefully examines banal and often taken-for-granted production practices involved in sport events. Only by tracing, comparing and contrasting the ideas discussed in policy and practice can ethical policy analysis take place. These findings raise a number of policy, ethical and practical concerns. Policy guidelines from the European Healthy Stadia Network and Manger Bouger should be reviewed with regard to why so little of the health-
promoting advice was operationalised at Euro 2016. Given WHO concerns about the relatively poor diets of children, state authority to intervene at such events should be reviewed.

There are broader policy implications for other mega events as well. Public health imperatives (particularly associated with the obesity epidemic) remain high on many governments’ agendas. Therefore there is space to question if public health agendas are in line with the moral and financial support given by government departments to events which promote unhealthy food and drink. Further complications arise if events are private, as distinct from public spaces. Local and regional governments could conceivably refuse to support events which do not meet specific dietary guidelines.

One might also consider the various ‘healthy’ outcomes of consuming unhealthy products. For example, there are enjoyable (if fleeting) positive psychological effects of consuming products high in sugar or alcohol content. A plausible argument may be that these events are particularly unique, and do not occur regularly, so these times of celebration should not deserve critique. Further, ideas about freedom and autonomy are worth noting. Customers might well be framed as choosing freely to enter the premises and consuming what they desire. One point regarding alcohol sales is relevant here. It was clear that the alcohol content of the beer on sale was very low (0.5%), so these spaces are already regulated to an extent to limit over-consumption. Given these are not wholly private spaces, and given SMEs are often lauded for their ability to foster positive social interaction, it is likely this debate will continue in the future. The findings presented here should inform this debate.

SMEs, by their nature, are often beyond the jurisdiction of national governments. Indeed, it is apparent national governments often lobby to win the rights to host mega events. Eick (2010) notes the influence that sport governing bodies (such as FIFA) have in this regard. FIFA ‘forces all applicants for hosting the World Cup (nation states as well as respective host cities) to accept all branding conditions, commercialization interests and security demands…even before the applicants would know whether they will be allowed to host the World Cup’ (Eick 2010, p. 91). Therefore the contractual obligations of host cities to encourage positive economic impact (for sponsors) may well supersede any public health agendas.
The findings presented here suggest the need for greater scrutiny by governments which endorse and support the hosting of transnational / international tournaments. While Osborne (1997) notes that ‘governments can at best provide the conditions to encourage people into healthy lifestyles but cannot guarantee health as such’ (p. 179), there is clearly space for governments to demand that events which they support live up to a certain standard of health food and drink provision. There is also space for event organisers to more rigorously consider health messages that the events can fairly endorse. They should consider opportunities to change practices in order to encourage healthier food and drink.

REFERENCES


