

# TV, Food Marketing and Childhood Obesity

Jason Y. Cartere  
Editor



# **TV, FOOD MARKETING AND CHILDHOOD OBESITY**

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# **TV, FOOD MARKETING AND CHILDHOOD OBESITY**

## PREFACE

Obesity has become a major health concern in the U.S. and other countries as overweight and obesity rates have increased markedly since the early 1980s. The rise in children's obesity is a particular concern, because overweight children are more likely to become overweight adults, and because obese children are likely to suffer from associated medical problems earlier in life. Food marketing is among the postulated contributors to the rise in obesity rates. Food marketing to children has come under particular scrutiny because children may be more susceptible to marketing and because early eating habits may persist. Some researchers report that children's exposure to television advertising has been increasing along with the rise in children's obesity rates. This book presents a comprehensive analysis of the exposure of children to television advertising.

Chapter 1 - Childhood obesity rates in the United States have increased dramatically over the past two decades, posing serious health risks for children. In July 2005, the Federal Trade Commission ("FTC") and the Department of Health and Human Services ("HHS") (collectively "the agencies") held a public workshop to consider what the private sector can and should do to help lower childhood obesity rates. The workshop reviewed current food marketing practices and examined the actions that the food industry and media are taking to create and market healthier foods to children and to encourage positive changes in children's diets and health. It also examined current self-regulatory efforts governing food marketing to children. Workshop participants expressed both praise and criticism of existing industry practices and self-regulatory efforts. Some also offered suggestions for ways that industry can build on current efforts and take new steps to tackle the childhood obesity problem.

Chapter 2 - Obesity has become a major health concern in the U.S. and other countries as overweight and obesity rates have increased markedly since the early

1980s. The rise in children's obesity is a particular concern, because overweight children are more likely to become overweight adults, and because obese children are likely to suffer from associated medical problems earlier in life.

Food marketing is among the postulated contributors to the rise in obesity rates. Food marketing to children has come under particular scrutiny because children may be more susceptible to marketing and because early eating habits may persist. Some researchers report that children's exposure to television advertising has been increasing along with the rise in children's obesity rates.

This chapter presents a comprehensive analysis of the exposure of children, ages 2–11, to television advertising based on copyrighted Nielsen Monitor-Plus/Nielsen Media Research audience data from the 2004 television programming season. The detailed data covers the individual advertisements shown during four weeks of national and local ad-supported programming and includes paid commercials, public service announcements, and promotions for television programming. These data are projected to annual estimates.

Thirty years ago similar assessments of children's television advertising were done for the Federal Trade Commission's 1978 Children's Advertising Rulemaking. Since these research reports were done before the rise in children's obesity, they provide a baseline to measure changes in children's exposure to television advertising.

Since the late 1970s, other marketing has likely changed and new forms of marketing have emerged, including Internet-based advertising techniques. This chapter does not cover these marketing activities, but the FTC is in the process of conducting another study to attempt to gauge the extent of all forms of marketing to children.<sup>1</sup>

This chapter can also be used to measure future changes in children's exposure to television advertising as industry, parents, and children react to these health concerns.

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*Chapter 1*

# **PERSPECTIVES ON MARKETING, SELF-REGULATION, AND CHILDHOOD OBESITY\***

***Deborah Platt Majoras, Pamela Jones Harbour,  
Jon Leibowitz, William E. Kovacic, J. Thomas Rosch and  
Michael O. Leavitt***

## **ABSTRACT**

Childhood obesity rates in the United States have increased dramatically over the past two decades, posing serious health risks for children. In July 2005, the Federal Trade Commission ("FTC") and the Department of Health and Human Services ("HHS") (collectively "the agencies") held a public workshop to consider what the private sector can and should do to help lower childhood obesity rates. The workshop reviewed current food marketing practices and examined the actions that the food industry and media are taking to create and market healthier foods to children and to encourage positive changes in children's diets and health. It also examined current self-regulatory efforts governing food marketing to children. Workshop participants expressed both praise and criticism of existing industry practices and self-regulatory efforts. Some also offered suggestions for ways that

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\* A Report on a Joint Workshop of the Federal Trade Commission & the Department of Health & Human Services.



industry can build on current efforts and take new steps to tackle the childhood obesity problem.

## **Current Food Marketing to Children**

The workshop found that food companies market their products to children using a wide variety of approaches. Traditional advertising in television and print media represents only one method of marketing food to children. Food marketers also reach children through packaging, labeling, promotional efforts like premiums and contests, product placement in movies and video games, branded advergames, licensing of popular children's characters, and other tie-ins with children's movies and television programs. The use of these marketing techniques appears to be increasing.

Some workshop participants raised the concern that all of these techniques for marketing food to children are contributing to increasing rates of childhood obesity. There was wide agreement at the workshop that many factors contribute to childhood obesity. The purpose of the workshop was not to determine whether or to what extent food marketing, or any other single factor, has contributed to the dramatic rise in childhood obesity rates. Workshop participants generally agreed that, regardless of the causes of childhood obesity, responsible food marketers can use a wide range of methods to play a positive role in improving children's diets. There also was recognition that consumers expect industry to help families improve their diets and lifestyles. Workshop participants acknowledged that consumers not only want more choices and more nutrition information, they also want industry to market responsibly. The workshop explored ways to encourage forms of marketing that make a positive impact on children's health.

## **Some Recent Changes in Food Marketing Practices**

Individual food companies at the workshop outlined changes in their marketing practices made to respond to rising childhood obesity rates. Many of them have introduced innovative products that are lower in calories and more nutritious. Some food companies have also modified their packaging to encourage portion control and make nutritious foods more convenient for parents and more appealing to children. Several of the companies participating in the workshop indicated that they are using labeling icons and seals to help consumers identify more nutritious, lower-calorie foods. Many

food companies also reported that they are emphasizing nutrition and healthy lifestyle messages in advertising, using marketing techniques popular with children, such as character licensing, to promote good nutrition, and engaging in nutrition and fitness outreach programs in local communities and schools. Finally, a few food companies are limiting their child-directed advertising to products meeting specific nutrition and calorie standards.

These responses to childhood obesity, however, are only in their nascence. Consumer advocates and public health groups suggested that new offerings and reformulations do not go far enough and are still outweighed by poor nutritional offerings. They also expressed concern about whether multiple nutrition icons would be confusing to consumers and about whether food companies could be relied on to be persuasive or accurate with nutrition messages that might be at odds with some of the products they market. Participants were divided on the question of whether it is necessary or feasible to limit children's marketing to foods that meet certain nutritional standards.

After review of these examples of positive industry initiatives, and the suggestions and criticism of those outside of industry, the agencies recommend that food companies take the following actions:

- Intensify their efforts to create new products and reformulate existing products to make them lower in calories, more nutritious, more appealing to children, and more convenient to prepare and eat;
- Help consumers control portion sizes and calories through smaller portions, single-serving packages, and other packaging cues;
- Explore labeling initiatives, including icons and seals, to identify lower-calorie, nutritious foods clearly and in a manner that does not mislead consumers;
- Review and revise their marketing practices with the goal of improving the overall nutritional profile of the foods marketed to children, for example, by adopting minimum nutritional standards for the foods they market to children, or by otherwise shifting emphasis to lower-calorie, more nutritious products; and
- Generally explore ways to improve efforts to educate consumers about nutrition and fitness, with simple and effective messages.

## **Schools**

Many food companies engage in a variety of marketing activities and sales in schools. Government studies have revealed that many of the foods sold competitively in schools, apart from the school meals programs, are high in calories and low in nutrition. To address concerns that have been raised about school marketing and sales, some food companies have decided to limit their marketing activities and restrict the foods they sell to more nutritious, lower-calorie products. The Institute of Medicine is currently developing nutritional standards for foods sold in schools as guidance for school districts and the food industry. The agencies recommend that all food companies review and revise their policies to improve the overall nutritional profile of the products they market and sell in schools.

## **Public Service Campaigns and Other Media Initiatives**

Media and entertainment companies, like food companies, are changing their practices in response to rising childhood obesity rates by incorporating health and nutrition messages into programming and creating public education campaigns. The agencies recommend that, with broad participation from other stakeholders, the media and entertainment companies continue to develop and disseminate educational messages about nutrition and fitness that are simple, positive, and repeated consistently across various platforms and venues.

The entertainment industry has also begun to capitalize on the popularity of its television and movie characters to promote children's health. At the same time, critics point out that these characters are often used to sell foods that are high in calories and low in nutrition. The agencies recommend that companies review and revise their licensing of children's television and movie characters to foster promotion of more nutritious, lower-calorie foods.

## **Marketing to Racial/Ethnic Communities**

The workshop also examined marketing of foods to certain racial and ethnic populations with a higher prevalence of childhood obesity. Addressing obesity in the Hispanic and African American communities is critical to decreasing the overall incidence of childhood obesity. Most childhood obesity initiatives to date have been directed at the general population. The

agencies recommend that food companies make a concerted effort to include, as part of their marketing of more nutritious, lower-calorie foods, promotions that are tailored to specific racial and ethnic minority populations in which childhood obesity is more prevalent. The agencies also recommend that food companies, the media, and entertainment companies tailor their public education programs and other outreach efforts to promote better nutrition and fitness to these racial and ethnic minority populations.

## Industry-Wide Self-Regulation

In addition to the actions of individual companies, the workshop examined self-regulatory efforts to ensure responsible food marketing to children. Participants focused on the Children's Advertising Review Unit ("CARU") of the Council of Better Business Bureaus, Inc. ("CBBB") and its guides requiring that advertising to children be truthful, accurate, and developmentally appropriate. Several suggestions were made at the workshop for expanding and enhancing the role of CARU to make it more effective in addressing food marketing to children, including a formal proposal by the food industry. These suggestions included updating and expanding the scope of CARU's authority to more explicitly cover newer forms of marketing, like the Internet and interactive games; ensuring that CARU has adequate resources and staff; and making the self-regulatory process more accessible to the public. Some also called for CARU to establish nutritional standards for foods marketed to children.

Although the CARU Guides are a good foundation for industry self-regulation, the agencies believe the guides should be expanded and their enforcement enhanced. The National Advertising Review Council ("NARC"), which sets policy and direction for CARU, has already taken some initial steps to address suggestions made at the workshop. As part of this review process, NARC and the CBBB recently formed a self-regulatory working group and have announced that the group intends to meet with various stakeholders as it develops proposals to modify the CARU Guides and to seek public input on any recommendations it makes. The agencies recommend that, as part of this effort, the CBBB/CARU working group take the following actions, as soon as practicable:

- Expand the CARU advisory board to include additional individuals with expertise in the
- various fields related to childhood obesity, such as nutrition, children's health, and developmental psychology;

- Allow parents and others to file complaints with CARU and make decisions more readily available to the public online; and
- Evaluate and determine whether CARU's staff and resources are sufficient to monitor and enforce adequately the CARU guides, in light of any changes made in response to the recommendations set forth in this chapter.

The agencies also recommend that, in addition to these actions, the CBBB/CARU working group also needs to consider a wide range of additional options as to how the CARU Guides could be modified to assist in combating childhood obesity. Among other things, the agencies recommend that the industry address the following issues:

- The scope of marketing activities covered by self-regulation, other than traditional advertising;
- The feasibility of minimum nutritional standards for foods marketed to children or other measures to improve the overall nutritional profile of foods marketed to children;
- The feasibility of an independent third-party seal or logo program identifying more nutritious, lower-calorie foods;
- Whether the use of product placement of foods is appropriate in certain media; and
- What additional sanctions or other measures should be incorporated into the CARU Guides to deter violations, especially repeated violations.

The agencies believe that improvements in each of these areas would be beneficial and that the CBBB/CARU working group should establish a process that is as open and transparent as possible, with broad participation by stakeholders to resolve these issues.

## **Report on Food Marketing**

The workshop record indicates that food companies market their products to children through a variety of means, including television, radio, print and Internet advertising, packaging, promotional events, in-store marketing, and product placement. Preliminary research by the FTC staff suggests that children today are exposed to fewer food advertisements on television than in the past. There is less information, however, about the

extent of other forms of marketing. A recently completed evidentiary review and analysis of food marketing and children's diets and health by the Institute of Medicine's Committee on Food Marketing and the Diets of Children and Youth (the "IOM Committee") noted significant gaps in the research. In particular, the IOM Committee's report notes that much of the relevant marketing research and data are proprietary and were not available to Committee members. It also noted that peer-reviewed literature on the role of food marketing in the diets of children is largely limited to television advertising and has not explored other marketing venues and techniques.

The FTC was recently directed by Congress to conduct a comprehensive food marketing study that will look at the full range of food marketing activities and expenditures directed at children and adolescents, drawing on both publicly available information and, as necessary, proprietary information from food companies. When completed, this study should provide a better understanding of the full extent and variety of techniques used to reach children. As described above, however, the agencies believe that there are many positive steps that individual food companies, and the private sector as a whole, can take now. The seriousness of the childhood obesity problem warrants such immediate action.

## Conclusion

The agencies believe that the discussions of food marketing and childhood obesity at the workshop have created momentum to enhance self-regulation and industry practices that promote better children's diets. The agencies will monitor future developments in food marketing to children and childhood obesity and will closely evaluate the changes that the CBBB/CARU working group makes to the self-regulatory process, including assessing whether these changes satisfactorily address the specific recommendations in this chapter. After allowing time for changes to be implemented, one or both of the agencies will issue a follow-up report assessing the extent to which positive, concrete measures have been implemented and identifying what, if any, additional steps may be warranted to ensure adequate progress is being made to address childhood obesity.

## ACRONYMS

AAAA	American Association of Advertising Agencies
AAF	American Advertising Federation
ABA	American Beverage Association
ACFN	American Council for Fitness and Nutrition
ADA	American Dietetic Association
ANA	Association of National Advertisers
CARU	Children's Advertising Review Unit
CBB	Council of Better Business Bureaus
CCFC	Campaign for a Commercial Free Childhood
CDC	Centers for Disease Control and Prevention
CIFC	Center for Informed Food Choices
CSPI	Center for Science in the Public Interest
CSS/GES	Collier Shannon Scott/Georgetown Economic Services
FCC	Federal Communications Commission
FDA	Food and Drug Administration
FNS	USDA Food and Nutrition Service
FTC	Federal Trade Commission
HHS	Department of Health and Human Services
GAO	Government Accountability Office (previously General Accounting Office)
GMA	Grocery Manufacturers of America
ICC	International Chamber of Commerce
IOM	Institute of Medicine of the National Academy of Sciences
NAD	National Advertising Division of the Council of Better Business Bureaus
NARB	National Advertising Review Board
NARC	National Advertising Review Council
NIH	National Institutes of Health
PBH	Produce for Better Health Foundation
PHAI	The Public Health Advocacy Institute
PMA	Promotion Marketing Association
USDA	United States Department of Agriculture

## **FEDERAL TRADE COMMISSION AND DEPARTMENT OF HEALTH AND HUMAN SERVICES WORKSHOP REPORT.<sup>1</sup>**

### **I. INTRODUCTION**

Obesity<sup>2</sup> among children in the United States is increasing rapidly. Since 1980, obesity rates have tripled among adolescents (ages 13 to 17) and doubled among younger children, with recent data indicating that 16% of children ages 6 to 19 years are obese.<sup>3</sup> In addition, not only have obesity rates increased, but the heaviest children are markedly heavier than they have been in the past.<sup>4</sup> Childhood obesity rates also are much higher in certain minority populations, particularly in the African-American and Hispanic communities, than in the general population.<sup>5</sup>

Childhood obesity is a significant public health problem,<sup>6</sup> because it raises serious and long-term disease risks. About 60% of obese children ages 5 to 10 years have at least one additional cardiovascular risk factor, such as elevated cholesterol, elevated insulin, elevated glucose, or elevated blood pressure. Twenty-five percent of obese children have two or more of these risk factors.<sup>7</sup> The health consequences of childhood obesity are compounded because it often persists into adulthood.<sup>8</sup> Obesity in adults is associated with diseases such as atherosclerosis, hypertension, cardiovascular disease, stroke, type II diabetes, hyperlipidemia, and arthritis. In addition to decreasing quality of life, obesity also has economic consequences. Recent estimates suggest that the total cost to Americans of obesity and associated health conditions was \$117 billion in 2000.<sup>9</sup>

The federal government has undertaken many initiatives to reverse rising obesity rates, particularly among children. Because parents exercise control over many of the food choices of their children, especially younger children, providing nutrition and other information about foods to parents is well-recognized as a critical means of helping them make better decisions.<sup>10</sup> Last year, HHS, in combination with the United States Department of Agriculture ("USDA"), issued the 2005 Dietary Guidelines for Americans, which emphasize balancing calorie consumption with physical activity.<sup>11</sup> As part of the Food Guidance System, USDA has also created educational materials for children. "My Pyramid for Kids" includes an interactive computer game, tips for families, and classroom materials designed to help children ages 6 to 11 make healthy eating and physical activity choices.<sup>12</sup> Also in 2005, the National Institutes of Health ("NIH") launched "We Can," a national nutrition and fitness education program focusing on children ages 8 to 13. The program provides parents with information that encourages healthy eating and a more active lifestyle.<sup>13</sup>



Some of these initiatives are undertaken in partnership with non-governmental organizations. For example, the “*VERB. It’s What You Do*” campaign is a national, multi cultural social marketing campaign coordinated by the Centers for Disease Control and Prevention (“CDC”). The campaign combines paid advertising, marketing strategies, and a variety of partnership efforts to reach young people ages 9 to 13.<sup>14</sup> Also, in October 2004, HHS signed a Memorandum of Understanding (“MOU”) with the Girl Scouts of America to educate girls about obesity, and under the MOU the Food and Drug Administration (“FDA”) is working with the Girl Scouts on healthy living initiatives.<sup>15</sup>

Several other government initiatives target obesity in the general population with nutrition and health messages for the whole family. In 2003, for instance, HHS launched the “Steps to a HealthierUS” initiative in support of President Bush’s HealthierUS goal of helping all Americans live longer, better, and healthier lives. This wide-ranging initiative identifies and encourages modest behavior changes, like taking the stairs instead of the elevator, which can yield significant results over time.<sup>16</sup> In addition, the FDA has an initiative to make food labeling a more effective tool for managing calories. The FDA is considering modifying the food labeling regulations to give more prominence to calories and to revise its approach to serving size information. The FDA is encouraging marketers to modify their labels voluntarily while these proposed regulatory changes are under consideration.<sup>17</sup> In addition, the FDA is promoting better access to calorie and nutrition information in restaurants. The agency has funded a Keystone National Dialogue<sup>18</sup> to seek consensus-based solutions to specific aspects of the obesity problem related to away-from-home foods, which account for about 46% of the total food budget of Americans and a significant portion of total calories consumed.<sup>19</sup> In connection with this effort, the FDA has been encouraging restaurants to voluntarily provide consumers with caloric information at point of purchase, and encouraging consumers to ask for this information.<sup>20</sup>

The FTC’s efforts to combat obesity include aggressive law enforcement actions against those who make false or misleading claims in advertising for weight loss products. Over the past decade, the Commission has brought over 100 cases targeting deceptive weight loss claims made for a variety of products and programs and has been successful in obtaining strong remedies in these cases.<sup>21</sup> The FTC recently has supplemented its traditional law enforcement activity by enlisting the assistance of the media to screen and reject weight loss ads with clearly deceptive claims.<sup>22</sup> These media screening efforts appear to be reducing the prevalence of the most deceptive claims for weight loss products.<sup>23</sup>

Despite these and other government initiatives, childhood obesity remains a serious public health problem. Some have contended that food marketing