

Food Marketing to Children and Health

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ABSTRACT

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In 2004, an estimated \$15 billion was spent on advertising and marketing to children and youth, more than \$10 billion of which is credited to food and beverage related products (Institute of Medicine, 2006, 168-169). Kids today are targeted with more advertising than ever before in history. On average, children view one food advertisement for every five minutes they spend watching television (Institute of Medicine, 2006, 181-183). Food marketing to children, specifically, has become a major part of American culture and is making an impact on the lives of youth evident in their declining health. If food marketing continues in the same manner it exists today then the wellbeing of American children and the future of our nation are in jeopardy.

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TABLE OF CONTENTS

	Page
Abstract.....	iii
Introduction.....	1
1. The Business of Children.....	3
Overview.....	3
The Child Consumer Market.....	3
A Valuable Segment.....	5
Food Marketing to Children.....	8
The Effects of Food Marketing on Health.....	13
2. Obesity.....	16
Overview.....	16
The Prevalence of Obesity.....	16
Exercise and Obesity.....	18
Diet and Obesity.....	20
3. Child Protection.....	24
Overview.....	24
Ethics and Responsibility.....	24
Regulation.....	25
4. Steps to Improvement.....	32
Overview.....	32
Schools and Corporations.....	32
Parents' Role in a Healthy Diet.....	34
Parents' Role in Healthy Activity.....	37
Summary.....	38
Conclusion.....	40
List of References.....	42
Appendices.....	47

LIST OF FIGURES

Figure	Page
1. Overweight and Obesity.....	17

INTRODUCTION

In 2004, an estimated \$15 billion was spent on advertising and marketing to children and youth, more than \$10 billion of which is credited to food and beverage related products (Institute of Medicine, 2006, 168-169). Kids today are targeted with more advertising than ever before. Estimates by the USDA say that kids view 44,000 television commercials each year and food marketing makes up approximately 50% (Institute of Medicine, 2006, 181-183). On average, children view one food advertisement for every five minutes they spend watching television (Institute of Medicine, 2006, 181-183). Businesses are investing billions of dollars each year in the youth market because of great profit potential. Food marketing to children, specifically, has become a major part of American culture and is making an impact on the lives of youth as evidenced by their declining health. Few studies have examined the effectiveness of food marketing on children's choices, but the studies that do exist drew similar conclusions. "Even brief exposures to televised food commercials were found to be effective, and many argue that intensive efforts of food marketing to target children and youth have produced detrimental influence on their overall eating habits"(Lamish, 2007, 87). If food marketing continues in the same manner it exists today then the wellbeing of American children and the future of our nation are in jeopardy.

Many citizens fail to recognize the power of marketing and its negative effects. This paper specifically examines the negative effects of food marketing to children in

relationship to obesity and declining health. First, I discuss the business of children. This includes the child segment, purchasing power, food marketing strategies, and the effects of food marketing on health. Second, I expose the prevalence of obesity and then consider the two main factors: exercise and diet. Third, I address the issue from an ethical standpoint by considering who is responsible for protecting children and the role of regulation. Next, I provide some advice and steps for improving the situation. Lastly, I share my final thoughts and conclusions on food marketing to children and how to minimize the negative affects on health in the future.

Chapter 1

THE BUSINESS OF CHILDREN

Overview

In this chapter, I will discuss how businesses today consider children to be a distinct category of consumers. I will describe how the children consumer market is different than in the past. Next, I will consider this marketing segment from a financial perspective. The child market has great spending power and is very profitable for businesses. I will then discuss food marketing to children and the strategies marketers employ. Finally, I explain the effects of food marketing on children's health.

The Child Consumer Market

Kids today are vastly different than in previous generations. *Marketing to the New Super Consumer* lists ten major differences. First, kids today are computer influenced. Eight out of ten kids ages 6 to 11 now use computers in their homes. They are also better educated than in the past. The internet and a host of new resources are available that allow kids to learn more at a faster rate. Third, they have busier schedules. "According to Roper's youth report, almost one third of all 6 to 11 year olds now say that they do not have enough free time" (Coffey et al, 2006, 15). Fourth, there are more media options. "Children and teenagers in the United Kingdom and in the United States may, on average, spend between four and five hours a day, outside school time, watching

some form of electronic media”(Cooke, 2002, 29-36). Kids spend as much time inside with TVs, computers, and video games as they do playing outside.

Next, kids are smarter consumers; they seek out information on the internet and are skeptical of advertising messages. A leading children’s marketer, Cy Schneider said, “Children are not that easy to entertain or persuade... and will not buy (or ask to buy) everything that is cleverly advertised to them. Despite their lack of experience, they are not that easily fooled”(Schneider, 1987, 2). However, advertising to children has been proven to be effective and many people feel that marketing techniques of increasing sophistication fool children more easily than marketers like to admit. Sixth, they are internet savvy. Roper Reports estimate that 79% of kids ages 8 to 12 use the internet regularly (Coffee et al, 2006, 18). Seventh, their toys are different. Toys today are expected to stimulate children and are often electronic, such as Game Boy, PlayStation, and Nintendo. Once kids begin playing with these toys, it is hard for them to go back to the less stimulating toys like puzzles.

Eighth, *Marketing to the New Super Consumer* says that kids are more connected than ever before. Cell phones, email, and instant messenger have allowed youth to have much more contact with one another than in the past. They are in contact even when they are not physically in the same place. Ninth, kids are demanding more of a say in the products that they use. Kids want their voices to be heard and businesses have learned to ask their opinion. For example, the Nickelodeon Network asks kids to vote online about various topics and have created the Kids Choice Awards to honor kids’ favorite celebrities (Coffee et al, 2006, 20). Lastly, children today seem to be increasingly

consensual. They seek out the advice of their parents in purchasing decisions and the stereotypic views of parent versus child battles are no longer accurate. Parents, especially mothers, and kids are now sharing in the decision-making process together.

However, it is not only the children who have changed. There are also many changes between the parents of today and those of the past. Women of today are spending more time getting an education and, therefore, spending more time in their professional careers. Adults are getting married later in life which means that newly married couples have dual incomes and more spending power. Later marriages also mean that women are having children later in life. (McDevitt et al, 1996, 27)

Parenting styles have also seen significant transformations over the years. As children, many lived in homes with two working parents and were part of the first generation to spend time in daycare centers and after school programs (Coffey et al, 2006, 23). Significant amounts of time were spent alone at home entertaining themselves with the television and phone. Moms and dads today grew up watching MTV, received formal educations, and many saw their parents' marriages end in divorce (Coffey et al, 2006, 24). As a result, parents are more savvy with both technology and marketing. These changes and experiences as children have influenced their parenting styles as adults.

A Valuable Segment

Differences in parenting and children, along with other cultural shifts have created a society in which food marketing to kids becomes feasible and significant. For hundreds

of years, children were “innocent receivers of gifts”, but today they are a “segment to be studied, targeted, and sold to corporations as commodities”(Kapur, 2005, 26-28). This change is a corporate response to the growing purchasing power of youth. Allowances, gifts, and payment from household chores or other jobs give youths the opportunity to build up discretionary incomes. “Capitalist expansion has turned children into little adults making consumer choices”(Kapur, 2005, 14). In 2002, children ages 4 to 12 years spent \$30 billion on direct purchases and, in 2003, 12 to 19 year olds spent an estimated \$175 billion (Institute of Medicine, 2006, 154). In addition, children influence the spending of as much as three hundred billion more dollars (Nestle, 2002, 176). Businesses recognize the spending power of the youth market and introduce new products each year designed to appeal to them.

As with mature markets, businesses recognize the importance and value of understanding the youth market. However, the depth and methods of research are astonishing. The internet has provided a new way to connect with children in the comfort of their homes. Researchers collect data from social and gaming websites that require kids to enter their personal information in order to gain access to the site. Lists containing information such as kids’ names and date of birth are then sold as commodities to marketers (Kapur, 2005, 28). Parents raised many concerns with practices like these which led to the development of internet regulations such as the Children's Online Privacy Protection Act of 1998 which addresses the rules of collecting personal information. Other advanced research techniques have been developed to gather data on consumers. One example is Nielsen’s people-meter, “a device that records who

is watching television and when [by assigning] buttons to every family member over two years old”(Kapur, 2005, 28). Technology such as this allows data collection of children’s media habits which can then be sold to marketers.

Businesses continue to develop new ways to research children, ethnography being one of the most popular. Ethnography is a study of people that seeks to observe individuals in real environments such as their homes or in stores. In *Kids as Customers*, McNeal explains how ethnographic research is useful in understanding children’s behavior and language. These insights aid in the development and placement of advertisements. The Levi-Strauss Corporation provides a typical example of ethnographic research. With parent permission, Levi’s followed children on shopping trips and visited their homes to view the inside of their closets. Levi used this information in the creation of a campaign directed at children.

The costs of research quickly add up and can be very expensive, but many companies view this spending as an investment. “Children are the brightest star of the consumer constellation. Companies virtually guarantee adult customers tomorrow if they invest in them as children”(Molnar, 2005, 6). One study found that “62% of college students buy the brand they grew up on” (Guber and Berry, 1993, 134). Companies are paying high dollar amounts to research and understand the child consumer market, but they are also paying more to reach them with advertising. Advertisers are paying more than twice the cost of advertising on prime-time television in order to reach a captive audience of children in schools through the Channel One program (Kapur, 2005, 32).

The Center for Commercial Free Education estimated in 1998 that the cost of a 30-second ad on Channel One could run as high as \$200,000.

Food Marketing to Children

Marketers devote a great deal of time developing brands and strategies to reach consumers. Selina Guber and Jon Berry give specific suggestions on reaching youth in their book, *Marketing to and Through Kids*. First, one of the most important aspects of any product is its packaging. Some believe that packaging is the most important aspect of advertising for any product. These authors explain the importance of choosing the right colors to represent the product. “Kids will immediately decide from the product’s colors, rightly or wrongly, who the product is for” (Guber and Berry, 1993, 110).

Marketers use bold, bright colors to attract the attention of children. Colors grab a child’s attention and tell them that the product is meant for them or it can turn them away by not fitting into their preconceived notions of color. Color alone can signal what gender or age the product is made for. The tendency is to avoid using pinks and purples since these are considered girl colors and boys would reject products packaged in them. However, girls are willing to use products packaged in blues and greens which are more associated with boys. For these reasons, it is extremely important for a product to be packaged in the colors that will accurately be perceived by the target consumer as something made for them.

Many other strategies are effective in reaching the youth market as well. Common ones include product arrangement, sampling, and in-store displays and

promotions. Store layouts are not simply about fitting the most products in a finite space; arrangement of goods is important for attracting the correct customers to each area.

Marketers have been able to successfully attract children by creating areas in a store that are specifically and obviously for them (Guber and Berry, 1993, 120-121). For example, Barnes & Noble fences off an area filled with brightly colored books, child-sized chairs, animals hanging from the ceiling, and toys. Kids automatically know that this section is theirs and it draws them to the products they will be interested in purchasing.

Sampling allows children to interact with the product and helps to create in their mind a need for the product (Guber and Berry, 1993, 120). Sampling is particularly successful in the supermarket because if a child likes the sample then he or she can immediately ask a parent to purchase the product. In-store displays and promotions attract young consumers with visual stimuli such as posters, balloons, familiar images, or characters. Grabbing children's attention may be facilitated by stimuli such as bright colors, flashing lights, sounds, and bold smells easily capture their attention. (Guber and Berry, 1993)

Characters in particular have become one of the most commonly used methods to signal that a product is for kids. They attract kids for several reasons: the child is nurtured by the character or the product is meant to be nurtured by the child, the child identifies with the product because he or she feels that the character is like them, the child wants to emulate or be like the character, or the child is attracted by differences in the character such as with an evil villain (Acuff, 1997, 160). Graphic designers, marketers, and top management spend a great deal of money and time coming up with characters

that they feel will reflect the brand, attract the attention of child consumers, and be memorable. Use of characters allows small children who cannot remember or pronounce the name of the product to recognize the packaging when they see it. A couple of brands that use this strategy include Frosted Flakes, Lucky Charms, Fruit Loops, and Kraft Mac n' Cheese. (Acuff, 1997, 159-174)

Many companies have used characters on the packaging of food and beverage products to attract the attention of children. Spokes characters are often unrelated to the product itself, but their images are licensed to companies for marketing purposes because of their popularity in children's television shows or movies (Acuff, 1997, 159-174). Of the food products marketed with characters in the past, a majority have not been healthy. However, in 2006, Disney changed its policies regarding the licensing of characters. With a new health initiative, Disney is licensing its characters on the packaging of its new Disney Garden line of fruit and vegetable products. Some of the products and characters available include tomatoes with Finding Nemo, grapes with Mickey and Minnie Mouse, and Apple Slices with the Incredibles. In a Disney Press Release, President Robert Iger said, "The Disney brand and characters are in a unique position to market food that kids and parents will feel good about giving them."

Movies today are not only an opportunity to entertain children and make money from ticket sales. The opening of a new movie means many new products and offerings. "A film is launched as an 'event' designed to sell not only the movie, but also toys, clothes, videos, record albums, and computer games to attract so much attention that one would have to live in another world to escape these commodities"(Kapur, 2005, 148).

Many movies were launched with this strategy and are often the most well known. Some examples include Pocahontas, Aladdin, Toy Story, and The Lion King. A more recent phenomenon is Hannah Montana which started as a television show, but has grown into a musical, film, video games, clothes, soundtrack, and much more. By 1997, 50% of the toys produced were associated with a film or television show (Kapur, 2005, 34).

Advances in technology and youth's familiarity with technology have enabled marketers to develop and use innovative strategies. Many companies in the food industry have created websites with large portions solely devoted to children. Impressive graphics, music, and games win the attention of kids and keep them entertained. General Mills' website, Millsberry.com, features a pretend town for kids to explore and an arcade with dozens of games, many based on its products. Similarly, M&M has a website with peppy music, bright colors, and a whole section devoted to fun and games. M&M also created www.becomeanmm.com where you can design your own M&M character. Marketers also utilize email, internet ads, pop-ups, online promotions, and podcasts to advertise to today's tech savvy consumers.

The strategy for reaching youth with food marketing which has generated the most controversy is the school system. Children spend nearly 2,000 hours in schools each year. It is a place of learning where few kids are skeptical of the messages they receive. In 2003, the President and Chief Operating Officer of Coca-Cola, John Alm, said, "The school system is where you build brand loyalty"(Molnar, 2005, 55). Marketers see this as a perfect opportunity to influence young minds and have worked their brands into American schools in various ways. Exclusive agreements are made with

schools to be the only carbonated soft drink brand available (called “pouring rights”), to have a vending machine for students, or branded food sold in the cafeteria. Companies sponsor fundraisers, sporting events, and offer scholarships. Businesses offer reward programs. In a few schools, it has gone as far as having advertisements on school buses and in school hallways.

One example of a corporate-wide reward program is Pizza Hut. Pizza Hut offers coupons for free pizza to children who participate in the Book It reading program. According to an article written by David Crary of the Chicago Sun Times in March 2007, over 50,000 schools in the United States participate in the program which amounts to around 22 million children each year. The article quotes Susan Linn, a Harvard psychologist and co-founder of the Campaign for a Commercial-Free Childhood, saying, “In the name of education, it promotes junk food consumption to a captive audience ... and undermines parents by positioning family visits to Pizza Hut as an integral component of raising literate children.” Many oppose the program because it rewards children for reading with free pizzas that are unhealthy. Children are not learning to appreciate reading, but rather continuing their addictions to greasy, non-nutritious foods. Alex Molnar, director of the Commercialism in Education Research Unit at Arizona State University, says, “This is corporate America using the schools as a crow bar to get inside the front doors of students' homes.” The Book It program is just one example of corporations attempting to reach children with their products regardless of the effects on their health and wellbeing.

Pizza Hut is only one of many companies working its way into American schools. Betty Crocker and General Mills both have a program which encourages the collection of box tops for which the companies reward schools with funding. Campbell's Soup has a similar program for can labels. (Kapur, 2005, 32) Other ideas of incorporating food into schools include using Cheerios or M&Ms to teach counting and comparing Prego and Ragu when learning about the thickness of liquids (Molnar, 2005, 48).

Many adults have looked disapprovingly on these corporate interactions with schools, but one of the most aggressively attacked is the Channel One Network. Channel One is a 12-minute television program that is watched in 12,000 schools in the United States and it is estimated that 8.3 million students view the program daily (Nestle, 2002, 189). Two minutes out of each 12-minute program are devoted to commercials. Marion Nestle quotes one critic in her book, *Food Politics*, saying, "There's no money passing hands, but to give up that hour a week of school time makes these the most expensive TV sets you ever laid eyes on ... That school time was purchased by taxpayers. If you watch Channel One for 90% of school days, it adds up to 31 hours a year ... This is required commercial television." Yet, schools allow the program to play in their classrooms in exchange for \$50,000 worth of technology equipment needed to play it because there may be no funds available to purchase the equipment otherwise (Kapur, 2005, 32).

The Effects of Food Marketing on Health

The health of children and youth in the United States has greatly declined over the past few decades (Institute of Medicine, 2006). Many feel that a relationship exists

between children's declining health status and the prevalence of food marketing.

McDonald's is a childhood favorite. Parents are attracted by reasonable prices and convenience, but what attracts children? James McNeal explains the phenomenon in his book, *The Kids Market – Myths and Realities*. He writes, "Play is children's number-one need, and no restaurant chain offers more. While parents teach, "Don't play with your food," McDonald's says, "Come PLAY with your food." The playground—the biggest permanent premium of any food retailer—the premium and Happy Meal bag, other children, even the process of eating French fries, offer a multi-play combination that makes McDonald's children's most preferred restaurant. It's not the hamburgers" (McNeal, 2007, 159-160). Marketers use their extensive knowledge of what attracts children to sell products even though they may not be the best choice concerning health. Recently, some corporations have begun to add healthy options to their menus. McDonald's changed the Happy Meal to include a choice of apple dippers instead of fries and milk or apple juice instead of a soft drink.

With all the strategies used by marketers today, it is impossible to protect children from advertising completely. However, it is important for parents to understand that research has determined there is a direct connection between advertising and eating habits. Marion Nestle finds that "sedentary visual activities amount to an average of 38 hours per week for the average child aged 2-18." It is evident that American children are viewing commercials and lots of them. In 1994, Saturday morning television programs included 997 commercials. This number has continued to rise. Of these advertisements, 57% advertised foods and beverages that are of poor nutritional value (Nestle, 2007, 34).

There were zero commercials for fruits, vegetables, bread or fish. The shocking fact, however, states, “Children who watch the most commercials tend to consume more calories, a finding consistent with the well-documented connection between hours spent watching television and obesity” (Nestle, 2007, 35). Food advertisements on television are exposing non-nutritious foods to American children and are distorting their understanding of what it means to maintain a healthy diet, perhaps contributing to obesity.

Chapter 2

OBESITY

Overview

Obesity is the health implication most associated with food marketing to children. However, most people do not realize how widespread obesity has grown. This chapter discusses the prevalence of obesity worldwide. Next, I discuss obesity relative to its two major factors, exercise and diet.

The Prevalence of Obesity

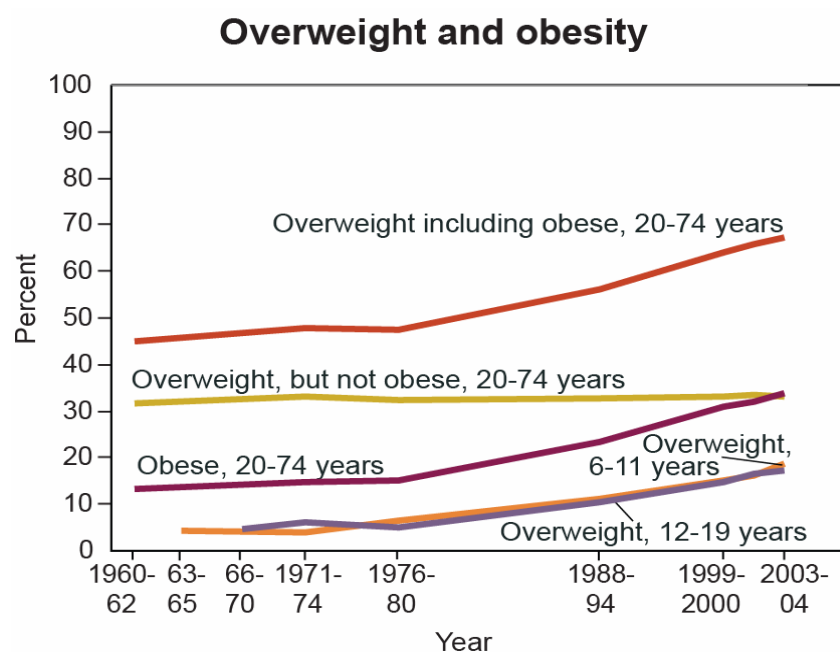
Many imagine obesity to be primarily a problem in the United States, but it can be considered truly a global epidemic. It is estimated worldwide that “1.1 billion adults and 10% of children are now classified as either being overweight or obese” (Flamenbaum, 2007, 2). Obesity is increasing in both developed countries such as the United States and transitional countries such as South Africa. The current levels of overweight [individuals] in countries as diverse as Mexico, Egypt, and South Africa are shown to be equal or greater than those in the United States (Flamenbaum, 2007, 7). The National Institute of Medicine says, “The dramatic rise in the number of U.S. children and youth who are obese, have type 2 diabetes, and are at increased risk for developing obesity and related chronic diseases in adulthood, is a matter of national concern.” According to the American Obesity Association, obesity is now the second leading cause of preventable

death in the United States. "Overweight and obesity may soon cause as much preventable disease and death as cigarette smoking," Surgeon General David Satcher said. "People tend to think of overweight and obesity as strictly a personal matter, but there is much that communities can and should do to address these problems."

Approximately 300,000 U.S. deaths a year currently are associated with obesity and overweight (compared to more than 400,000 deaths a year associated with cigarette smoking). (U.S. Department of Health and Human Services, 2001)

A disturbing aspect of obesity is that it seems as if no one is exempt. One of the most affected groups worldwide is children. "Children of all races, ethnicities, and socioeconomic strata are experiencing rising rates of obesity"(Okie, 2005, 5). The National Center for Health Statistics estimates the severity of obesity in the United States. Data from 2003-04 found that "17.1% of children and adolescents 2-19 years of age (over 12 and a half million)

were overweight, and 32.2% of adults (over 66 million) were obese. Almost 5% of adults were extremely obese." The chart to the right illustrates the rise in obesity in the United States from



SOURCES: Centers for Disease Control and Prevention, National Center for Health Statistics, *Health, United States, 2006*, Figure 13. Data from the National Health and Nutrition Examination Survey.

1960 to 2004. Since 2004, these numbers have continued to rise or, at best, remain steady.

Other countries around the world are also experiencing high rates of childhood obesity. This is extremely important because many individuals who are obese as children are also obese as adults. One study found that “about a third of obese preschool children and a half of obese school-age children become obese adults”(Flamenbaum, 2007, 6). The International Obesity Task Force estimates “at least 155 million school-age children worldwide are overweight or obese” and an additional “22 million younger children are also affected”(www.iotf.org).

Obesity has many negative affects including medical, emotional, and social consequences. Obese children often experience strained relationships with other children due to teasing, bullying, or isolation (Okie, 2005, 6). This often results in obese children having low self-confidence or depression and some even exhibit aggressive behavior (Okie, 2005, 6). In addition to these consequences, obesity is also a burden on the economy. “The annual economic costs due to medical expenses and lost income as a result of complications of adult obesity is estimated to be as high as approximately 70 billion dollars in the USA”(Kiess et al, 2004, IX).

Exercise and Obesity

In order to meet adequate levels of exercise, it is important to understand what exactly exercise is. The US Department of Health and Human Services defines exercise as “bodily movement that is produced by the contraction of skeletal muscle and that

substantially increases energy expenditure.” Physical activity has four dimensions: frequency, intensity, duration and type (Lawrence and Worsley, 2007, 306). In general, the USDA recommends that individuals do a minimum of 30 minutes of moderate physical exercise each day. Sixty minutes of moderate to vigorous physical activity daily is suggested to prevent weight gain. “For those who have lost weight, at least 60 to 90 minutes a day may be needed to maintain the weight loss”(MyPyramid.gov). For children and teenagers it is recommended they be physically active for at least one hour each day to maintain a healthy weight. Physical activity for children is usually a combination of “active play, organized and non-organized sports, school physical education, transport-related activities, chores, and other incidental activities”(Pangrazi, 1996).

Approximately one-third of children today are not meeting physical activity recommendations (Lawrence and Worsley, 2007, 310). “Some experts have estimated that during the elementary grades children may average as little as 10 minutes per week of moderate to vigorous activity in school P.E. classes”(Okie, 2005, 122). One of the major contributors to decreased levels of physical activity among children is sedentary behavior in leisure time at home. Outdoor activities (such as running, riding a bike, roller skating and sports) often have high levels of physical activity, but involvement these types of activities has been declining (Okie, 2005, 123). Instead, children have spent more time watching television, on the computer, and playing video games.

Most research examining inactivity and sedentary behavior has sought to determine the link between television watching and obesity. “Many epidemiological

studies have found positive associations between increased prevalence of obesity or [being] overweight and greater lengths of television viewing time”(Institute of Medicine, 2005, 301). One study found that “children who watched more than five hours of television per day were 4.6 times as likely to be obese as those watching zero to two hours”(Institute of Medicine, 2005, 301). Other factors thought to contribute to high levels of sedentary behavior include high levels of sedentary activity among parents, lack of guidelines for television viewing, and the decreased safety in many neighborhoods which limits time spent playing outside (Institute of Medicine, 2005, 303).

Diet and Obesity

Though there are many factors that go into an individual becoming obese, the U.S. Department of Agriculture and the National Institute of Medicine have concluded that food marketing to children and youth is a significant factor in the obesity crisis. Research has shown that kids spend a large portion of their money on food purchases. These purchases tend to be on low-nutrient foods like carbonated soft drinks, candy, salty snacks, desserts, and sugary foods (Coffey et al, 2006, 103). “Average soda consumption more than doubled from 22.4 gallons in 1970 to 56.1 gallons in 1998”(Molnar, 2005, 56). More than 30% of the daily calories consumed by children and adolescents are from low-nutrient foods (Institute of Medicine, 2006, 63).

Our bodies have certain basic requirements that must be met in order to grow and maintain themselves (Atkins and Bowler, 2007, 125). Significant problems arise when these requirements are not met. For example, children drinking more soft drinks and less

milk are not receiving enough calcium which leads to low bone density, problems with growth, and osteoporosis (Molnar, 2005, 56). This is only one of the many health problems resulting from poor diet. An imbalance of nutrient consumption is called 'malnutrition'. This is not to be confused with 'undernutrition' which is when you do not consume enough calories. American children are malnourished. They consume plenty of calories, but are not receiving the vitamins and minerals that their bodies need. Atkins and Bowler directly state, "It is possible to be malnourished even in rich countries, for instance on an unbalanced diet of junk food, or through over-eating" (Atkins and Bowler, 2007, 125). This in turn, leads to obesity.

A child's metabolism is often more efficient than an adult's at digesting calories. This has led some parents to believe that childhood is the time for junk food and indulgence. However, there are chemical changes in the human body that result. Hormones in our body help to maintain body weight by controlling eating. Leptin is one of these hormones. Fat cells secrete leptin into the bloodstream to tell the body how much fat is being stored. The hypothalamus interprets the level of leptin in the blood and tells the brain when to stop eating (Martindale, 2005, 12).

Michael Schwartz, an endocrinologist at the University of Washington in Seattle, explains, "The problem is, people who gain weight develop resistance to leptin's power. Their brain loses the ability to respond to these hormones as body fat increases." Eating foods that are high in fat actually changes the hormone system in the body and results in humans feeling a need to consume more fat. The damage is permanent. Schwartz continues, "The fatter they get, and the more leptin they make, the more insensitive the

hypothalamus becomes. Eventually the hypothalamus interprets the elevated level as normal—and forever after misreads the drops of leptin caused by weight loss as a starvation warning” (Martindale, 2005, 12). Therefore, many children who consume high levels of fat as children develop insensitivity to leptin and as adults cannot help but gain weight as their bodies keep signaling a need for more food because of the false starvation warning sent out by the hypothalamus.

High-fat and high-sugar foods are a key factor in the problem of child obesity. Many low-nutrient foods cost less in a grocery store and are available everywhere we turn. Additionally, Americans are eating out at restaurants more than ever before (Buchholz, 2005). Proportionally, restaurant prices have fallen in relationship to income and more people have chosen to eat away from home (Buchholz, 2005, 23). According to Marion Nestle, Chair of New York University’s Department of Nutrition and Food Studies, “American children eat one out of every three meals outside the home, where foods are demonstrably higher in calories, fat, saturated fat, and salt as well as lower in more desirable nutrients” (Nestle, 2007, 33). Great tasting foods in restaurants that are favored by consumers are less healthful than most meals cooked at home. One study found that teenagers who eat fast food for lunch eat more than 60% of their daily calories in that single meal (Okie, 2005, 86). Portion sizes are also doubled or tripled to increase the value perceived by the customer. The “supersizing of food portions trains people to over consume [...] and is directly correlated with Americans’ increased calorie intake” (Okie, 2005, 87).

One initial assumption is that Americans are obese because they eat much larger meals than in the past. While the portion size in many restaurants has increased, larger meals are not the sole cause for increased calorie consumption. Americans “are noshing and nibbling like never before. Between the 1970s and the 1990s, men and women have essentially doubled the calories consumed between meals” (Buchholz, 2007, 22). Snack foods make up a significant portion of the calories consumed by children and often fall into the low-nutrient category. Unhealthy foods, increased calorie consumption due to snacking, and misunderstandings of portion sizes have all contributed to the problems of hormone insensitivity and obesity. (Buchholz, 2005)

Chapter 3

CHILD PROTECTION

Overview

Given the effects food marketing can have on health, it is important that children are protected. This chapter discusses food marketing to children from an ethical perspective and considers who should be held responsible. I then discuss the regulatory environment and its role in child protection.

Ethics and Responsibility

The marketing of unhealthy food products leads to many ethical concerns. Some look at it from the perspective of empowerment. Empowering products or programs are those which “contribute in some significant way toward an individual’s positive development. Disempowering products or programs, therefore, are those which have a significant negative impact on an individual’s development”(Acuff, 1997, 18).

Disempowering products should not be the focus of marketing to children. Therefore, many critics feel that food marketers should not advertise unhealthy products to children because they are disempowering. Dan Acuff and Robert Reiher feel that “the greatest danger is not overt evil intent, but the failure of child-targeted product and program creators, developers, marketers, and decision makers to stand up and act on what they know to be true regarding products and programs with the potential to damage children’s

bodies or minds.” Companies know which products are harmful to the health of children and, therefore, the danger comes from corporate denial of responsibility in protecting the wellbeing of children.

Responsibility is a key factor in this debate. Is it the responsibility of parents, schools, government, or corporations to ensure the protection of children? Most would agree that it is a shared responsibility and there are parts to be played by each group. There are a few companies like Kraft which have worked to change their products to be more healthy and remain good tasting in order to promote better eating habits. However, most corporations have avoided any admittance of responsibility because of the profit made from selling disempowering products to children (Nestle, 2005). Marion Nestle says, “The fast food industry deliberately markets unhealthy foods to children of all ages. Children are hit with advertisements for food, candy, and sugary drinks on television, on the Internet, in magazines, and at schools. Children wear clothing with fast food and soft drink logos and play with toys that resemble fast food mascots. The fast food industry recognizes that children have money to spend on its products and that gaining children as customers at a young age likely makes them customers for life” (Nestle, 2005, 28).

Regulation

If corporations continue to market unhealthy food products to children regardless of the negative impacts, it becomes the responsibility of some monitoring organization to protect children from disempowering products. In 2004, the World Health Organization (WHO) published the report *Marketing Food to Children: the Global Regulatory*

Environment. This report examines the regulations emerging in many countries around the world regarding marketing to children. It provides a view into the regulatory environment designed to protect the wellbeing of children.

There are three types of regulations: self-regulation, non-statutory, and statutory. Self-regulation is a form of regulation that is put into place by some group other than the government, often by an industry itself. Non-Statutory regulations are imposed by government, but are not formal law. Statutory regulations are legislated rules that the government has the power to enforce. The WHO report investigated 73 countries regarding their policies related to six marketing techniques: television advertising, in-school marketing, sponsorship, product placement, Internet marketing, and sales promotions. (Hawkes, 2004) When discussing regulation, my focus is primarily on television advertising and food-specific regulations.

Television is the most common way for marketers to reach children with advertising for food and beverage products, and, therefore, a majority of the regulations that exist are specific to television. The statutory regulation of television has two objectives: “to ensure that advertisers abide by certain guidelines and/or to restrict the timing and content of advertisements”(Hawkes, 2004, 10). Most countries have or are developing television regulations to protect children. “Eighty-five percent of the 73 countries surveyed have some form of regulation on television advertising to children and almost half had specific restrictions on the timing and content of television advertisements directed at children”(Hawkes, 2004, iii). In general, Europe is leading the way in the protection of children from marketers. Of the 33 European countries

surveyed, all have policies about marketing to children on television. Ireland, the Netherlands, and the United Kingdom have the most comprehensive regulations (Hawkes, 2004, 14). (See Table 1 in the appendix for a breakdown of statutory and self-regulations related to television advertising to children by country.)

Concern regarding marketing to children continues to increase. A number of countries surveyed in 2004 (Australia, Brazil, France, Germany, India, Ireland, Italy, Malaysia, New Zealand, Poland, and the United Kingdom) were in the process of developing television regulations, so today even more regulations should be in place. Though many of these regulations are imposed by governmental authority, self-regulatory authorities have also been tightening guidelines in order to address the growing concerns.

In the United States, the Children's Advertising Review Unit (CARU) is the primary regulator of advertising to children. CARU was founded in 1974 with the purpose of promoting responsible children's advertising. CARU monitors and "reviews between 6 and 12 hours of programming each day, along with radio, websites, and print advertisements"(Hawkes, 2004, 17). As www.caru.org states, "CARU's basic activities are the review and evaluation of child-directed advertising in all media, and online privacy practices as they affect children. When these are found to be misleading, inaccurate, or inconsistent with CARU's *Self-Regulatory Guidelines for Children's Advertising*, CARU seeks change through the voluntary cooperation of advertisers." An important word to note in that statement is "voluntary." CARU has no official power to enforce their guidelines on advertisers.

Many of CARU's guidelines are determined by research about child development. Children at different stages of development understand advertising differently. Children younger than three years of age do not recognize any difference between programming and commercials. Ages 3 to 7 can distinguish commercials from programming, but they believe that advertisements are truthful and entertaining. They do not understand that the intention of an advertisement is to sell them a product. Therefore, they have difficulty evaluating a product and determining if it is good for them or not. Ages 7 to 11 are able to more thoroughly process advertisements. There is an understanding that commercials are not always truthful and are biased, but they feel no need to defend themselves from the messages. At this age, children begin to understand that stores are intended to sell products and that there is some tradeoff between cost and benefit. However, it is not until children reach an age between 11 and 16 that they can fully understand advertisements, shopping, and value in order to make decisions (Hansen, 2002, 32). Therefore, it is part of CARU's job to discourage companies from using advertisements that will deceive children or take advantage of their limited understanding.

On a larger scale, the International Chamber of Commerce (ICC) creates rules and standards for companies. Companies are not required to adhere to these policies, but agree to them voluntarily. Article 14 of the ICC International Code of Advertising Practice addresses a number of concerns specific to children such as the innocence and inexperience of children, avoidance of harm, and social values. An interesting element of the code falls under social values. It states, "Advertisements should not undermine the authority, responsibility, judgment or tastes of parents ... Advertisements should not

include any direct appeal to children and young people to persuade their parents or other adults to buy advertised products for them”(Hawkes, 2004, 12). Despite guidelines discouraging advertisers from this, parents would probably agree that many commercials still use these tactics.

Many self-regulatory organizations such as the ICC, the World Federation of Advertisers, and the European Advertising Standards Alliance believe that statutory regulations are not needed. They believe self-regulation is more efficient with respect to both cost and time. However, health and consumer groups tend to disagree. The International Association of Consumer Food Organizations (IACFO) believes that “allowing industry to regulate children’s advertising is inherently problematic: industry guidelines are too television-centric, they do not deal with the compound effects of advertising, and they have insufficient sanctions”(Hawkes, 2004, 13). Another group, Center for Science in the Public Interest, said, “Self-regulation is a case of foxes guarding the hen-house”(Hawkes, 2004, 13). Self-regulatory organizations often have conflicting interests between doing what is best for business and what is best for children. Therefore, the key to effective self-regulation is sanctions that are sufficient in keeping companies from choosing to disregard advertising guidelines. Under self-regulation, it is often the responsibility of the industry organization to enforce regulations. For example, the Better Business Bureau should hold its member organizations responsible for following the rules and impose sanctions when they are violated.

Several different penalties may be used under self-regulation. Some examples include requiring a removal of the advertisement in violation, issuing a negative press

release about the advertiser and removing the ability to be a member of the self-regulatory organization. Other severe penalties could occur, such as disqualification from consideration for advertising awards, encouraging the media to not allow advertising space or time for the company, or asking the government to investigate the situation. Penalties for violating statutory regulations are much easier to enforce due to government support and typically consist of a monetary fine. (Hawkes, 2004, 18)

Some countries have developed regulations specific to food advertising. Hawkes found that “22 of the 73 countries surveyed have either a specific clause on food advertising contained within their existing regulations on advertising, or a separate code covering food advertising”(Hawkes, 2004, 24). The purpose of a food clause is to protect the public in three ways. First, a food clause can “prevent advertisements that promote unhealthy diets”(Hawkes, 2004, 24). This includes marketing snack foods as snacks and not as a meal replacement, and not encouraging over-consumption. Second, food clauses protect consumers from advertisements that mislead them about the nutritional value of foods. Third, many food clauses require the company to promote dental hygiene in their advertisements, especially if the product has high sugar content. (Hawkes, 2004, 24)

The United Kingdom has been one of the leaders in developing detailed regulations on food advertising to children. A few examples include:

1. Slimming products may not be aimed at people under 18.
2. Children must not be encouraged to eat frequently throughout the day.
3. Consumption of food or drink (especially sweet, sticky food) near bedtime must not be promoted.

4. Advertiser cannot suggest that confectionary or snack foods can be substituted for balanced meals.
5. Advertiser must not discourage eating of fruits and vegetables.
6. Regard should be paid to oral hygiene.
7. Health claims must be based on sound scientific evidence.

These regulations are in place to protect the health of children in the UK and to hopefully promote better health behaviors. Other nations, such as Austria, have completely banned advertising during children's programs (Atkins and Bowler, 2007, 292). (See Table 2 in the appendix for a list of the countries with food advertising regulations and the type of regulation)

Chapter 4

STEPS TO IMPROVEMENT

Overview

In this chapter, I propose that educators, businessmen, and parents are all stakeholders in the food marketing and obesity problem. Each party can take steps to improve the health of children. First, I address the responsibilities of schools and corporations and how they can be a part of the solution. Parents, being the closest to children, have the most power to initiate immediate changes. I discuss improvements parents can make concerning both diet and activity.

Schools and Corporations

It is the responsibility of schools to help teach children about good health and diet. School administrators and government officials need to be aware of corporate involvement in schools and the potential effects on children. Limiting corporate involvement will help kids to get an unbiased message about nutrition. If schools do their part to teach children how to eat healthfully and provide nutritious foods then children will be empowered to make good choices.

It is also time for corporations and marketers to take their share of responsibility in protecting children. Not only is it important for marketers not to deceive children, it is important for marketers to consider the products that they are selling to children.

Unhealthy foods are dangerous for children and a detriment to their health. There comes a point when business must leave the potential for a new product and increased profit unearned because it is understood that these products would only hurt children in the long-run. Corporations should consider producing products that are beneficial to the health of children and market these products instead.

A few corporations have set the tone by developing guidelines for all their products and marketing. Advertisements for Nestle food products will be age-appropriate. Kraft Foods began an anti-obesity initiative in 2004 and “declared that their advertisements will not promote over-consumption”(Hawkes, 2004, 9). Coca-Cola’s policy says it will not market to children under the age of 12. Lastly, Heinz will no longer produce advertising to target children pre-school age or younger. The policies set by these corporations have set a precedent for other food and beverage manufacturers and marketers. As more companies develop these policies, the environment for children will continue to improve.

Parents play an important role in raising and protecting children. Parents can take more responsibility by investing more time and energy into their children. If parents limited the amount time kids spend watching television, playing video games, and surfing the internet then children would be exposed to fewer marketing messages. There is no way for children to avoid all forms of advertising. For this reason, it is important that parents talk with their children about advertising and educate them on the strategies that marketers use. Parents should talk with their children about the intentions of commercials and help them understand what products are being sold. The more involved

parents are in the lives of their children, the more they can make a conscious effort to promote good health and the better off their children will be.

When it comes to health and nutrition, children need to be taught. It is not enough to know which foods are healthy; parents need to teach their children about a healthy lifestyle by putting it into practice. Therefore, this responsibility falls on parents and cannot be left to schools and corporations. Whether the goal is prevention or treatment, parents can help their children greatly by focusing on food intake and energy expenditure. Research is clear that children are not getting enough exercise and they are not eating healthfully. Changes in these two areas can drastically improve the overall health of children.

Parents' Role in a Healthy Diet

It is imperative that parents understand the types of food children should be eating. When developing a dietary plan for an obese child, it is important to recognize that a “reduction diet for a child is not simply a scaled-down version” of what adults consume (Pařízková, 2000, 213). Total consumption for the child should decrease, but it is important that children are still receiving all the vitamins and minerals necessary to healthy growth and development. Specifically, the ideal diet should seek to lower consumption of saturated fats, sweets, and highly processed foods (Pařízková, 2000, 213). One of the safest approaches to modifying a child’s diet is to limit the amount of high fat foods. Many snacks such as ice cream, potato chips, and soft drinks fall into this category. While watching TV or playing video games, children are often unaware of the

quantity of foods they are eating. Therefore, parents should not allow children to eat snacks (especially those high in fat) while participating in activities such as these. Limiting high fat foods “may result in a reduction of total caloric intake by approximately one third”(Pařízková, 2000, 214).

Being too restrictive can strain parents’ relationships with their children and result in the child rebelling against the new rules. It is recommended that dietary changes are implemented for the entire family and not only certain individuals. This will reduce the likelihood of one child feeling that he or she is “on a diet” while the other children eat normally. Parents are not excluded from this; rather, they should lead the change to healthy eating by setting an example. Many believe that “when parents adopt a healthier lifestyle, they may foster the development of healthful behaviors and patterns in their children”(Institute of Medicine, 2005, 305).

Increasing the quality of the foods children eat is an important step toward a healthy lifestyle. However, healthy eating behaviors also require the quantity of foods consumed to be regulated. Due to the prevalence of childhood obesity, many parents now worry a great deal about over-feeding their children. However, parents should not become excessively controlling. Children should not underfed in an attempt to prevent obesity; the ultimate goal should always be a healthy lifestyle and not a specific weight. (Pařízková, 2000, 214-215)

One of the most important factors related to the quantity of consumption is portion size. Portions sizes over the years have steadily been increasing (Okie, 2005, 87). Studies have shown that “larger portions do increase intake”(Institute of Medicine, 2005,

294). Other studies have found that children usually eat whatever portion they are given. Adults tend to give children larger portions than a child would give themselves. As a result, it is believed that “giving children control over portion size may prevent overeating or eating in the absence of hunger”(Institute of Medicine, 2005, 295). Only children old enough to select their own portions should be given the control to do so. For very young children, “parents should offer age-appropriate portions”(Institute of Medicine, 2005, 296). In addition to allowing children to control portion size, parents should avoid making these common mistakes: too strictly limiting palatable foods, encouraging children to “clean their plates,” and using food as a reward.

Knowing that many meals are eaten in restaurants, it is important to teach children how to make healthy choices when ordering. The United States Department of Agriculture’s created the website MyPyramid.gov as a guide for healthy living. The site provides the following tips on how to eat healthy when eating out:

- As a beverage choice, ask for water or order fat-free or low-fat milk, unsweetened tea, or other drinks without added sugars.
- Ask for whole wheat bread for sandwiches.
- In a restaurant, start your meal with a salad packed with veggies, to help control hunger and feel satisfied sooner.
- Choose main dishes that include vegetables, such as stir fries, kebobs, or pasta with a tomato sauce.
- Order steamed, grilled, or broiled dishes instead of those that are fried or sautéed.

- Choose a “small” or “medium” portion. This includes main dishes, side dishes, and beverages.
- Order an item from the menu instead of heading for the “all-you-can-eat” buffet.

MyPyramid also suggests how to avoid eating the oversized portions that are served in many restaurants. Entrées are often very large, so try ordering an appetizer or side dish instead. Entrées can also be split between two people. If you are eating alone or do not want to split an entrée, pack up half of your food in a to-go box as soon as it is delivered to your table. Lastly, just because you paid for the food does not mean you to eat it all. MyPyramid recommends, “Resign from the ‘clean your plate club’ – when you’ve eaten enough, leave the rest.” Making these simple adjustments when eating out will help to avoid overeating and keep a more balanced diet. (More tips and suggestions on achieving a healthy diet can be found at http://www.mypyramid.gov/tips_resources/index.html)

Parents’ Role in Healthy Activity

The second major factor in improving health is increasing levels of physical activity. “When diet alone is the focus of weight reduction up to 25% of lean tissue may be lost. This loss may be reduced to approximately 5% by adding exercise”(Pařízková, 2000, 228). Exercise is even more important for children because dieting is not preferred during the growing years. Parents should aim to involve their kids in more activities that include physical exercise.

Television is often the activity which occupies children and keeps them from participating in activities that are more physical. Parents should limit the time children spend watching television and doing other sedentary activities like video games and the computer. This can be done by keeping televisions out of kids' bedrooms, establishing a time limit for these activities, avoid using the television or movies as a way to keep children out of your way, and having other alternative activities available. If changes are made and rules are developed, it is critical that parents take part by following the guidelines themselves. (Walsh, 1994, 47-49)

One of the best ways to encourage physical activity is for parents to get involved. If appropriate, parents can walk places with their children rather than driving in the car or riding a bus. Next, activities that are both fun and active will be enjoyable for the whole family. Some suggestions are taking children to the park or recreational facilities, going on a walk or bike ride, or playing games like jump rope or Frisbee. Older children often enjoy competitive activities so parents should encourage them to participate in organized sports like swimming, dance, soccer, basketball, etc. (Institute of Medicine, 2005, 300)

Summary

There is no one party to blame for the obesity problems among children. Parents, educators, and businessmen have all contributed to the problem. Similarly, no individual can expect to independently solve the obesity crisis. Complicated problems require all parties to demonstrate responsibility and make an effort to improve. As Acuff and Reihel said, I believe the issues lead back to the ideals of empowerment and responsibility.

Much more responsibility can, and should, be taken by schools, corporations, and parents in protecting the wellbeing of children. When each group does its part, children will be empowered to live long healthy lives.

CONCLUSION

As data has shown, obesity is clearly a major health concern in the United States and around the world. Though many variables are involved in the problem, food marketing to children has been identified as a significant factor. After my extensive research, I am aware of the problems related to food marketing to children, the regulations that exist, and I have identified steps to be taken in order to create a better environment for their children. While it is ideal for parents, schools, and corporations to take responsibility to protect children, it will not be achieved quickly. Incremental steps are the key to creating an environment for children that promotes healthy living.

In the United States, one of the major problems I see is that sanctions are not sufficient. Corporations may be members of a self-regulatory organization, but the penalties for violating guidelines are not severe enough or are nonexistent. Many corporations are willing to accept the punishment if it is profitable. Therefore, I believe that statutory guidelines need to be legislated or that the Children Advertising Review Unit needs the power to enforce their decisions. CARU was created with the goal of empowering children by protecting them from the influence of marketing, but there is little CARU can actually do. Giving CARU more power and being backed with government support would subject the marketing messages children see to more screening and would hold corporations responsible to an authority that is looking out for

the best interest of children. I believe this would be one step toward protecting American children and allowing for a brighter future.

Though regulation will help improve the environment in which children develop, parents undoubtedly have the greatest opportunity to educate and protect their children. Parents must be willing to accept responsibility in the obesity epidemic that has developed. As David Walsh said in *Selling out America's Children*, "When we say society is transmitting values which are harmful to children and to the future of our country, we are talking about ourselves. Society is us. The only way for a society to change its course is for individual members to speak out and take responsibility for their part of the society's actions, and not limit their concerns to the things which have the most immediate effect on themselves and their own children"(Walsh, 1994, 15). It is important that parents become more aware of the obesity issue and how they can improve the health of their children. "Simply by making small changes in daily routines and in the home environment, parents have more power than they may think to improve the family diet and move their own habits and those of their children in a direction that can help everyone to achieve or maintain a healthy weight"(Okie, 2005, 89).

LIST OF REFERENCES

Acuff, Daniel S., and Robert H. Reiher. What Kids Buy and Why: The Psychology of Marketing to Kids. New York: Free Press, 1997.

Atkins, P. J., and Ian R. Bowler. Food in Society: Economy, Culture, Geography. London: Arnold, 2001.

Buchholz, Todd. "Fast food is not the primary cause of obesity." in Fast Food. Collins, Tracy Brown, ed. Detroit: Greenhaven Press, 2005.

Capaldi, Elizabeth D. Why we Eat what we Eat: The Psychology of Eating. 1st ed. Washington, DC: American Psychological Association, 1996.

Center for Commercial Free Public Education. "What's on Channel 1?" 8 Jul. 1998. <<http://www.corpwatch.org/article.php?id=888>>.

Coffey, Timothy J., David L. Siegel, and Gregory Livingston. Marketing to the New Super Consumer: Mom & Kid. Ithaca, NY: Paramount Market Pub., 2006.

Cooke, R. "Kids and Media." International Journal of Advertising and Marketing to Children 3(4), 2002.

Crary, David. "Critics denounce Pizza Hut program that rewards young readers with free pizzas." Associated Press 3 Mar. 2007. 5 April 2007.

<<http://www.suntimes.com/lifestyleshealth/280609,bookit030307.article>>.

Flamenbaum, Richard K. Global Dimensions of Childhood Obesity. New York: Nova Science Publishers, 2007.

Guber, Selina S., and Jon Berry. Marketing to and through Kids. New York: McGraw-Hill Inc., 1993.

Gunter, Barrie, Caroline Oates, and Mark Blades. Advertising to Children on TV: Content, Impact, and Regulation. Mahwah, N.J.: Lawrence Erlbaum, 2005.

Hansen, Flemming, Anne Martensen, Jeanette Rasmussen, Birgitte Tufte, eds. Children: Consumption, Advertising and Media. 1st ed. Copenhagen: Copenhagen Business School Press, 2002.

Hawkes, Corinna. Marketing Food to Children: The Global Regulatory Environment. World Health Organization, 2004.

Institute of Medicine (U.S.). Committee on Food Marketing and the Diets of Children and Youth, et al. Food Marketing to Children and Youth: Threat Or Opportunity?. Washington, D.C.: National Academies Press, 2006.

Institute of Medicine (U.S.).Committee on Prevention of Obesity in Children and Youth,
et al. Preventing Childhood Obesity: Health in the Balance. Washington, D.C.:
National Academies Press, 2005.

International Obesity Task Force. 15 Feb. 2008. <www.ietf.org>.

Kapur, Jyotsna. Coining for Capital: Movies, Marketing, and the Transformation of
Childhood. New Brunswick, N.J.: Rutgers University Press, 2005.

Kiess, W., Claude Marcus, and Martin Wabitsch. Obesity in Childhood and Adolescence.
Vol. 9. Basel; New York: Karger, 2004.

Lamish, Dafnah. Children and Television: A Global Perspective. Malden, MA; Oxford:
Blackwell Pub., 2007.

Lawrence, Mark, and Tony Worsley. Public Health Nutrition: From Principles to
Practice. Maidenhead; New York, N.Y.: Open University Press/ McGraw Hill
Education, 2007.

Liston, Barbara. "Disney Goes Healthy." Time Magazine 20 Oct. 2006.

Martindale, Diane. "Fast food may be addictive." in Fast Food. Collins, Tracy Brown, ed.
Detroit: Greenhaven Press, 2005.

McDevitt, Thomas M., Arjun Adlakha, Timothy B. Fowler and Vera Harris-Bourne.

Trends in Adolescent Fertility and Contraceptive Use in the Developing World. U.S.

Bureau of the Census, Report IPC/95–1. U.S. Government Printing Office,

Washington, DC, 1996.

McNeal, James U. The Kids Market: Myths and Realities. Ithaca, NY: Paramount

Market, 1999.

Molnar, Alex. School Commercialism: From Democratic Ideal to Market Commodity.

New York: Routledge, 2005.

Nestle, Marion. Food Politics: How the Food Industry Influences Nutrition and Health.

Vol. 3. Berkeley: University of California Press, 2002.

Nestle, Marion. “The Fast Food Industry Intentionally Markets Unhealthy Foods to

Children.” in Fast Food. Collins, Tracy Brown, ed. Detroit: Greenhaven Press, 2005.

“Obesity still a major problem.” National Center for Health Statistics 14 Apr. 2006. 14

Mar. 2008. <http://www.cdc.gov/nchs/pressroom/06facts/obesity03_04.htm>.

Okie, Susan. Fed Up!: Winning the War Against Childhood Obesity. Washington, D.C.:

Joseph Henry Press, 2005.

Pangrazi, Robert P., and Charles B. Corbin. "Physical Activity for Children and Youth."

JOPERD: The Journal of Physical Education, Recreation & Dance 67.4 (1996): 38.

Pařízková, Jana, and Andrew P. Hills. Childhood Obesity: Prevention and Treatment.

Boca Raton, FL: CRC Press, 2000.

Schneider, Cy. Children's Television: The Art, the Business, and how it Works.

Lincolnwood, Ill.: NTC Business Books, 1987.

United States Department of Health and Human Services: Office of the Surgeon General.

"Overweight and Obesity Threaten U.S. Health Gains." 13 Dec. 2001.

Walsh, David Allen. Selling Out America's Children: How America Puts Profits before

Values--and what Parents can do. Minneapolis: Deaconess Press, 1994.

APPENDICES

Table 1 - Statutory regulations and self-regulations relating to television advertising to children

Country or area	Statutory guidelines on advertising to children	Self-regulatory guidelines on advertising to children	Specific restrictions on advertising to children ^a	Ban on child-targeted advertising
Albania	X		X	
Argentina		X		
Australia	X	X	X	
Austria	X	X	X	
Bangladesh				
Belgium	X	X	X	
Bolivia				
Bosnia and Herzegovina	X			
Brazil	X	X		
Brunei Darussalam				
Bulgaria	X		X	
Cambodia				
Canada	X	X	X	
Quebec			X	X
Chile		X		
China	X			
China, Hong Kong SAR	X			
Colombia		X		
Costa Rica				
Czech Republic	X	X	X	
Denmark	X	X	X	
Estonia	X		X	
Fiji		X		
Finland	X	X	X	
France	X	X	X	
Germany	X	X	X	
Greece	X	X	X	
Guatemala		X		
Hungary	X	X		
Iceland	X	X	X	
India	X	X		
Indonesia	X			
Ireland	X	X	X	
Israel	X	X		
Italy	X	X	X ^b	
Japan		X		
Kenya		X		
Kuwait				
Lao People's Democratic Republic				
Latvia	X	X		

Country or area	Statutory guidelines on advertising to children	Self-regulatory guidelines on advertising to children	Specific restrictions on advertising to children ^a	Ban on child-targeted advertising
Liechtenstein	X			
Luxembourg	X	X	X	
Malaysia	X	X	X	
Mexico		X		
Mozambique				
Netherlands		X ^c	X	
New Zealand		X ^c	X ^d	
Nigeria	X			
Norway	X	X	X	X
Pakistan	X			
Paraguay	X	X		
Peru		X		
Philippines		X		
Poland	X	X		
Portugal	X	X	X	
Republic of Korea	X	X	X	
Romania	X		X	
Russian Federation	X	X	X	
Saudi Arabia				
Singapore		X		
Slovakia	X	X		
Slovenia	X	X	X	
South Africa		X		
Spain	X	X	X	
Sweden	X	X	X	X
Switzerland	X	X		
Thailand				
Turkey	X	X	X	
United Kingdom	X	X	X	
United Republic of Tanzania		X		
Uruguay	X	X		
United States of America	X	X	X ^e	
Venezuela	X	X		
Vietnam				

SAR = Special Administrative Region.

Blank space = no regulations identified.

^a Not including restrictions on the advertising of alcohol, tobacco and medical products.

^b Within both statutory and self-regulations.

^c Self-regulation is enabled by framework legislation.

^d Within self-regulations.

^e Legislative restrictions but no statutory ethical guidelines.

Source: Hawkes, 2004, 14-16

Table 2 - Statutory regulations and self-regulations specific to food advertising

Country or area	Regulation
	Statutory regulation
Australia	<p>When advertising to children “An advertisement for a food product may not contain any misleading or incorrect information about the nutritional value of that product.”</p> <p>CTS 19, clause 6 of the Children's Television Standards of the Australian Broadcasting Act (1992),^{141,142}</p> <p>“It is prohibited to advertise food in a manner which is false or misleading.”</p> <p>The State and Territory Food Acts (various years)¹⁴³</p>
Belgium ^a	<p>In the Flemish region, advertisements for confectionery must carry a toothbrush logo. In the French-speaking region, a pictogram is not required but advertisers must insert a health message.¹⁴⁴</p>
China, Hong Kong SAR	<p>“No advertisements should encourage patterns of behaviour which are prejudicial to health.” [as they relate to nutrition and diet]</p> <p>Section 21, on nutritional and dietary effects, of the Generic Code of Practice on Television Advertising Standards (latest revision 2003)¹⁴⁵</p>
Denmark	<p>“Advertisements for chocolate, sweets, soft drinks, snacks and other similar products may not indicate that the product may replace regular meals.”</p> <p>Special rules on the protection of children and young people under the age of 18 years. Executive Order No. 489 concerning Radio and Television Advertising and Programme Sponsorship (June 11, 1997)¹⁴⁶</p>
Finland	<p>“When advertising chocolate, candy, soft drinks, snacks, etc. do not give the impression that they replace regular food.”</p> <p>Consumer Ombudsman's Guidelines on Children and Marketing (1997, rev.</p>
Malaysia	<p>“All advertisements on food and drinks must show the necessity of a balanced diet.”</p>
Nigeria	<p>Advertisements for food are vetted by the National Agency for Foods and Drugs Administration and Control, according to the following guidelines:</p> <p>“Foods (including non-alcoholic beverages)</p> <p>Nutrition: Any claim as to the nutritious value of any product must bescientifically verifiable.</p> <p>Social Status: No advertisement should present any product in this category as responsible for enhancing or reducing or in any way influencing the social status of the consumer.”</p> <p>Section 4.9 of the Nigerian Code of Advertising Practice (1992)¹⁴⁹</p>

Country or area	Regulation
Philippines	<p>" No person shall advertise any food, drug, cosmetic, device or hazardous substance in a manner that is false, misleading or deceptive or is likely to create an erroneous impression regarding its character, value, quantity, composition, merit, or safety."</p>
Republic of Korea	<p>"Commercial advertisements must not use: — Messages promoting unhealthy eating habits among children. — The use of superlatives such as 'best' and 'most' when referring to food products." Clause 7 of Article 24 and Clause 3 of Article 26 of the Regulations Concerning Deliberation on Advertising Broadcast of August 28, 2000¹⁵¹</p> <p>"With respect to the denomination,manufacturing method and quality of food, additives, apparatus, containers and packages, no false label or exaggerated advertisement shall be made, and for the package, no extravagant one shall be made, and with respect to the labels of food and additives, no label or advertisement which might lead to confusing them with medicine shall be made.This provision shall also apply to the nutritive value and ingredients of food and additives." Article 11 of the Food Sanitation Act¹⁵²</p> <p>"Labels and advertisements which bewilder or might bewilder consumers with expressions, such as 'highest','best','special', etc., or ambiguous expression, such as 'peculiar manufacturing method' etc. In this case, such</p>
Romania	<p>"Advertising for foodstuff shall observe the following requirements: (b) it shall not encourage or justify excessive consumption of food; (c) comparison between different foodstuffs shall not discourage or suggest renouncement of essential foods, especially fresh vegetables and fruits." Article 9, b) and c) of the Decision no. 22 of January 28, 2003 Concerning Certain Rules of Advertising and Teleshopping¹⁵⁴</p>
Thailand ^a	<p>All food advertising requires approval from the Public Relation and Advertising Control section of the Food and Drug Administration (FDA) of the Ministry of Public Health, according to the following guidelines: "False or deceptive advertising of food product qualities or benefits is prohibited."^{155, 156}</p>

Country or area	Regulation
United Kingdom	<p>“Advertising must not give a misleading impression of the nutritional or health benefits of the product as a whole (8.3.1).</p> <p>Advertisements must not encourage or condone excessive consumption of any food. (Note. The interpretation of this rule should be by reference to current generally accepted nutritional advice. It would clearly not be inconsistent with shots of someone enjoying a chocolate bar; it would, (continued) however, preclude someone being shown eating whole boxes of chocolates in one sitting) (8.3.2).</p> <p>Advertisements must not disparage good dietary practice. Comparisons between products must not discourage the selection of options such as fresh fruit and vegetables which accepted dietary opinion recommends should form a greater part of the average diet (8.3.3).</p> <p>Advertisements must not encourage or condone damaging oral health care practices. (Note. For instance, advertisements must not encourage frequent consumption throughout the day, particularly of potentially cariogenic products such as those containing sugar. This rule has children’s dental</p>

	Self-regulation/voluntary guidelines
Australia	<p>“An advertisement for a food product may not contain any misleading or incorrect information about the nutritional value of that product.”</p> <p>CTS 19.6 of the Commercial Television Industry Code of Practice (1999)¹⁵⁸</p> <p>Advertisements to children for food and/or beverages:</p> <p>(a) should not encourage or promote an inactive lifestyle combined with unhealthy eating or drinking habits; and</p> <p>(b) must not contain any misleading or incorrect information about the nutritional value of that Product.”</p> <p>Article 2.10 of the Australian Association of National Advertisers Code for Advertising to Children (2003)¹⁵⁹</p>
Brazil	<p>The advertisement of food products shall “expressly indicate, if possible, the nutritional and caloric value of the product being advertised.”</p> <p>Exhibit H on Food Products, clause 4, Brazilian Advertising Self-regulation Code (1978)¹⁶⁰</p>
Colombia	<p>The advertisements of products not comprising part of the basic diet, such as appetizers, desserts, sweets, chewing gum, and drinks made with artificial ingredients, must not suggest that these products can be substituted for the basic diet. (Translation from Spanish).</p> <p>Article 46 of the section on children, Colombian Code of Advertising Self-regulation (1998)¹⁶¹</p>

Country or area	Regulation
Guatemala	<p>Food producers and advertisers must:</p> <ul style="list-style-type: none"> - Refrain from including declarations in the advertisement that could deceive consumers in terms of the composition, characteristics, and the consequences of the foods that are being advertised. - Exaggerated statements are prohibited. - No advertisement must state a nutritional content if this claim cannot (continued) be substantiated by tests, performed by persons or entities ad hoc. - No advertisement of foods and food products can contain statements that could be dangerous to health. (Translation from Spanish). <p>Section III on Food, Article 1, of the Code of Ethical Advertising (1999)¹⁶²</p>
Ireland	<p>“Advertisements should not encourage an unhealthy lifestyle or unhealthy eating or drinking habits; advertisements representing meal time should clearly and adequately depict the role of the product within the framework of a balanced diet; snack foods should be clearly represented as such, and not as substitutes for meals.”</p> <p>Section 5.4 on Advertising and Children of the Code of Advertising Standards for Ireland (2001)¹⁶³</p>
France	<p>8. Eating behaviour</p> <p>When evoking or portraying eating behaviour, advertisements should not encourage behavioural patterns that go against the eating principles commonly embraced by a healthy lifestyle.</p> <p>Binge eating Advertisements should not encourage children to consume any product in excess. This means, for example, portraying a child consuming a product without restraint or in unreasonable quantities. This does not, however, include the expression of satisfaction or pleasure derived from consuming the product.</p> <p>Snacking</p> <p>Advertisements should not encourage children to eat ceaselessly throughout the day.</p> <p>For example, while advertisements that depict children eating during or after some form of physical activity are justifiable, portraying inactive children snacking is unacceptable.</p> <p>Snacking should not be portrayed as a substitute for proper meals.</p> <p>Reference to parents</p> <p>Advertisements should not degrade or trivialise parental authority or advice regarding the consumption of such products, nor should they suggest that</p>

Country or area	Regulation
France (continued)	<p>Nutritional equivalents and comparisons</p> <p>In cases where commercials include nutritional equivalence between food products, such information should be relevant from a nutritional perspective. For instance, the information should deal with the nutrients which the compared products have in common and which are present in significant quantities.</p> <p>The presentation of nutritional equivalence should not encourage consumers to substitute one category for another, particularly by suggesting that the benefits of two compared products are more or less the same.</p> <p>Exaggerated portrayals</p> <p>Advertisements should not suggest that by merely consuming a product, optimal performance or complete success in an artistic activity, at school in sport- will be achieved. (Translations from French).</p> <p>Chapter 8 of Recommandation Enfant, Bureau de Vérification de la Publicité (2003)164</p>
Netherlands	<p>“Advertising for confectionery shall, without prejudice to the general section of the Advertising Code, be subject to the following Special Advertising Code:</p> <ol style="list-style-type: none"> 1. Advertising shall not encourage excessive consumption, nor shall such consumption be held up as an example or be excused. 2. Advertising shall not suggest that confectionery can replace a meal. 3. Advertising shall in no way contain negative statements about people or who wish to limit their consumption of confectionery. 4. Advertising shall not establish a link between the consumption of confectionery and health, with the exception of advertising for products which come under the jurisdiction of the Inspection Board for the Commendation of Health Products (KAG) and permitted by the KAG. Reference to a relatively low sugar content shall not be used to create the impression that the chance of tooth decay is small. 5. Situations in which confectionery is consumed by a person immediately after brushing his teeth and before going to bed shall not be shown, nor shall consumption at such times be encouraged. 6. Television advertising for confectionery shall show a stylised image of a tooth: <ol style="list-style-type: none"> a. during the entire film, in which case the image is at least one tenth the height of the screen; b. for three seconds of the film, in which case the image will be at least one eighth the height of the screen; c. filling the entire picture for one and a half second of the agreed broadcast time. 7. Advertising in printed matter intended for, or which may be assumed will be used by, children shall not be shown. <p>Advertising code for confectionery of the Dutch Advertising Code (2000) 165</p>

Country or area	Regulation
New Zealand	<p>New Zealand “Advertisements directed at children should observe a high standard of social responsibility:</p> <p>(a) Advertisements for treat foods directed at children should not actively encourage children to eat or drink them near bedtime, to eat or drink them frequently throughout the day or to replace main meals with them.</p> <p>(b) Advertisements for nutritional foods essential for a healthy balanced diet are encouraged to advocate the benefits of such foods, particularly when directed at children. A large and liberal but commonsense interpretation is allowed. However, benefits should not be exaggerated and should not imply that a single food should replace a balanced and varied diet.</p> <p>(c) Advertisements should not encourage excessive consumption of any particular food.”</p> <p>Principle 3 of the Advertising Standards Authority's Code for Advertising of Food (2001)¹⁶⁶</p>
Japan	<p>“Advertising of food which is suspected to be a health hazard, as well as such advertising that contains exaggerations or false statements shall not be handled.”</p> <p>Clause 103 of the National Association of Commercial Broadcasters' Broadcasting Standards (1970, rev. 1999)¹⁶⁷</p>
Singapore	<p>“Advertisements should not actively encourage children to eat excessively throughout the day or to replace main meals with confectionery or snacks foods.”</p> <p>Article 3.9 of Section C of the Singapore Code of Advertising Practice (latest rev. 2003)¹⁶⁸</p>
United States	<p>“Representation of food products should be made so as to encourage sound use of the product with a view toward healthy development of the child and development of good nutritional practices. Advertisements representing mealtime should clearly and adequately depict the role of the product within the framework of a balanced diet. Snack foods should be clearly represented as such, and not as substitutes for meals.”</p> <p>Article 8 of the Product Presentation and Claim of the Children's Advertising Review Unit's Self-regulatory Guidelines for Children's Advertising (1975, latest rev. 2003)¹⁶⁹</p>

SAR = Special Administrative Region.

^a Information obtained from a secondary source; specific text of the regulation was not identified.

Source: Hawkes, 2004, 25-30