

**Children Now's National Conference
"Is Food Marketing to Children Getting Any Healthier?"
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Opening Remarks/Introduction

Thank you for inviting me to participate and providing me an opportunity to comment on Professor Kunkel's latest research, "The Impact of Industry Self-Regulation on the Nutritional Quality of Foods Advertised on Television to Children." In his study, Professor Kunkel concludes that the participants in BBB's Children's Food & Beverage Advertising Initiative are complying with their commitments, which confirms our own analysis. We also were gratified, but not surprised, to learn that the foods advertised to children by our participants are better than those being advertised by non-participants.

We part company, however, over his conclusions about the nutritional quality of the participants' products based on his analyses of the products according to HHS's "Go, Slow, Whoa" food categories. These categories have considerable merit, of course, in helping consumers plan menus over the course of a week, and potentially could help Americans have healthier diets.

But, that said, these categories are a woefully inadequate way to judge whether self regulation is being effective, and provide the wrong answer to the question, "Is Food Marketing to Children Getting Any Healthier?" The answer to that question is unequivocally, YES.

Our goal was and is to improve the nutritional profile of foods in child-directed advertising—to shift the mix of what is advertised, over time. It was self evident that the consumer package goods companies and Quick Serve Restaurant companies who are members of BBB's Initiative were not going to become *simply* or *entirely* fruit and vegetable, low-fat dairy and whole grain purveyors over the last two years, or ever. Instead they have improved the nutritional profile of a wide variety of foods.

Although our intent was *not* to reduce child-directed advertising, but instead to change it, it is noteworthy that four of our 16 participants do not engage in child-directed advertising on TV or other measured media. The Coca-Cola Company has continued its long-time practice and three others, Cadbury, Hershey and Mars decided they would no longer engage in child-directed advertising. Additionally, Nestlé decided it would no longer advertise Wonka® brand candy products or any of its confections to children, though it is advertising 100% fruit juices, and flavored milk under its Pledge.

These companies had other options under our program, such as using healthy lifestyle messages with their ads or advertising portion control packages. Instead,

they decided not to advertise at all. I think this was brave of them because some of their competitors who have not joined the program continue to actively advertise to kids. These positive changes on the part of the participant candy companies are due to self regulation.

For the other participants, as a first step, they were required to have nutrition standards, grounded in science, to govern their child-directed advertising. This, of course, by itself, was a big change from before the program was launched when few companies had articulated standards or comprehensive standards. At that time, it was okay to advertise virtually any product to kids.

That's changed. Now nutrition standards govern what appears in child-directed food advertising. And, the nutrition standards the companies use are familiar, recognizable ones. They are generally based on the Dietary Guidelines and mostly use the familiar "35, 10, 35" metric.¹

When you look at the profile of foods in the program you will see that self regulation *is* working. Dozens and dozens of products have been reformulated, at considerable cost, to meet company pledges and new products or meal combinations that meet the companies' standards have been introduced.² For example, the sugar content of cereals (including kid cereals that are not advertised to kids) has been reduced, generally by at least 10%, and significant further reductions are in the works. The sodium content of soups, pastas, and other products has been greatly reduced through an iterative process and fats and calories have been reduced in other products. Nutrient density (which is the presence of vitamins and minerals and food groups to be encouraged) also has improved.

Self Regulation Has Resulted in Positive Changes Without a Uniform Standard

These positive changes show that meaningful improvement can be achieved with nutrition standards that vary somewhat from each other.

Accordingly, in my view, the emphasis on the need for a single uniform nutrition standard or the use of a third party's nutrition standard, is misplaced.

Further, government and third party nutrition standards are themselves not consistent. Indeed, the groups advocating uniform standards and criticizing our program have themselves used at least five different sets of standards in recent research. The plethora of third party standards, created for different purposes, leads to many different opinions about the appropriate nutritional profile of advertised foods and the progress that is being achieved.³

¹ For those not familiar with this, it means that no more than 35% of calories can come from fat, less than 10% calories from saturated fat and no more than 35% of calories from sugar (or no more than 35% sugar by weight).

² The nutrition standards also serve as handcuffs, voluntarily put on, that limit new product development. Many new product ideas have not been pursued because the proposed products would not meet the company's nutrition standards for child-directed advertising.

³ Interestingly, even HHS's categorization of products has changed during the last couple years. For example, frozen yogurts, frozen fruit juice bars and baked chips used to be in "Go" category; now they are in the "Slow" category.

What's important to parents and kids is whether meaningful change is occurring—which has happened and will continue to occur—and not *simply* whether all products are above or below any particular threshold or in a particular category. For example, the fact that a product may be above a particular threshold doesn't necessarily mean it is of "poor nutritional quality."⁴

I want to present three examples relating to HHS' "Go, Slow, Whoa" categories that illustrate the differences among government and third party standards and guidelines and show how complex the nutrition science area is and why *how* you assess change is important.

Breakfast Cereals. I find it inexplicable that French toast, waffles and pancakes, traditionally eaten with butter and syrup, are in the "Slow" category, while sweetened cereals, generally consumed with milk, are in the "Whoa" category, regardless of their particular sugar content.⁵ Even if eaten plain, without butter or syrup or jam, French toast and the like, while perhaps lower in sugar than most kids' cereals, are generally higher in calories, fat and sodium. Also, a typical piece of French toast may have lower nutrient density than a serving of cereal. So, what's the nutrition science that supports these categorizations?

I find the sweetened cereal categorization particularly troublesome given that the Dietary Guidelines for Americans 2005, which are prepared by USDA and HHS, state that "adding a small amount of sugar to nutrient-dense foods such as breakfast cereals [and reduced fat milk products] may increase their consumption and improve citizens' nutrient intake without contributing excessive calories."⁶

Further, putting all sweetened cereals into the "Whoa" category ignores other third-party recommendations that include a standard of no more than 35% sugars by weight — a standard that a number of cereals in our program meet. And, even Frosted Mini Wheats, which is an excellent source of fiber and contains whole grains, would be in the "Whoa" category because it has 12 grams of sugar per serving. Yet, it received a "healthy nutrition rating" from another academic activist group. Another cereal, Cheerios, beloved by adults and toddlers alike, with whole grains and many vitamins and minerals, also seemingly would be on the "Whoa" list because it lists one gram of sugar on the Nutrition Facts Panel, making it "sweetened."⁷ These examples show that, for assessing change, the "Go, Slow, Whoa" categories are too simplistic.

In fact, because of participants' commitments the sugar content of many children's cereals has been reduced. No longer are there cereals with as much as 16 grams of sugar being advertised to kids. Instead, none have more than 12 grams, and many

⁴ This is the phrasing used in the CSPI Report, "Better for Who?" (Nov. 2009).

⁵ Kunkel's report describes "Whoa" foods, based on statements from HHS's We Can! campaign, as high in calories and low in nutrients. That is clearly not the case for cereals in the CFBAI program. Such cereals generally have less than 175 calories per serving and contain many essential vitamins and minerals.

⁶ One may ask whether 12 grams is "small"? In our view it is relatively small when you consider that cereal accounts for only 5 percent of a child's daily intake of calories while serving as a good source of nutrients, and just five percent of the sugar in their diets. Further, independent research has consistently shown that frequent cereal eaters have healthier body weights than those who don't eat cereal — both kids and adults. They also get more needed nutrients, and eat less fat, cholesterol, and sodium than those who don't eat cereal.

⁷ The "Go, Slow, Whoa" chart and the We Can! materials do not identify any particular threshold for calling a cereal "sweetened." Professor Kunkel's report says, however, that he considered a product a "sugared" cereal "if sugar was one of the first three ingredients listed." Kunkel Report at p. 14. Even though Cheerios have only one gram of sugar, it is the third ingredient listed on its label.

— almost two thirds — have 11 grams or less, and additional significant reductions are in the works. Many provide at least 8 grams of whole grains, all are a good source of many essential vitamins and minerals, and the vast majority are a good source of Vitamin D, which is important for healthy bones. Similarly, many also are a good source of calcium and fiber — nutrients that the Dietary Guidelines identify as nutrient shortfalls for children. Finally, there is a “uniform” Federal government standard for “healthy” nutrient content, and virtually all of the cereals in the program meet FDA’s definition.

Yet today we are being told to disregard how products rate under that uniform government standard and their important nutrient characteristics, and to accept that cereals with any added sugar content belong in the “Whoa” category or are “nutritionally deficient.” That doesn’t make sense.

Clearly how products are categorized in the “Go, Slow, Whoa” system is confusing and sometimes inconsistent with other recommendations and tips from government.

100% Fruit Juice. These products are in the “Slow” or “sometimes” category under HHS’s standards, yet the IOM Committee on Competitive Foods in its April 2007 report put 100% fruit juice (in 4 oz servings for elementary and middle schoolers) in its Tier 1 category of foods – that is, products that contain food groups to be encouraged.⁸ Similarly, the USDA/HHS food pyramid tips for healthy eating include the following: “At breakfast, top your *cereal* (no recommendation that it be unsweetened cereal) with bananas or peaches; add blueberries to pancakes; drink 100% orange or grapefruit juice....”⁹

Another government site, “fruit and veggies matter,” in its question and answer section, says 4 oz of fruit juice counts as a ½ cup of fruit in meeting your daily requirements.¹⁰ Of course, whole fruit is preferred. But I think it is commonly accepted that juice can count toward one of the five a day that is commonly recommended, which is more than “sometimes” under the “Go, Slow, Whoa” table. But, because of this categorization, those participants advertising 100% fruit juices would have their products lumped into the “Slow” category.

Yogurts. Under “Go, Slow, Whoa,” low-fat or fat-free yogurts are in the “Go” category, without regard to their sugar content. The Center for Science in the Public Interest, however, uses a general standard of no more than 35% sugar by *weight* for what it considers “healthy” products. In contrast, the Institute of Medicine’s April 2007 guidelines for competitive foods in schools generally recommend a standard of no more than 35% *calories* from sugar. But, IOM provides an exception to its general sugar standard for yogurts. For yogurts, IOM recommends no more than 30 grams of total sugars per 8 oz portion as packaged¹¹ (and for 4 oz servings as packaged this would be 15 grams). The committee explained that “dairy products are excepted (that is they allow more than 35% of the calories to come from sugars) because they provide calcium for bone health.” “These standards,” according to the IOM

⁸ See <http://www.iom.edu/~media/Files/Report%20Files/2007/Nutrition-Standards-for-Foods-in-Schools-Leading-the-Way-toward-Healthier-Youth/FoodinSchools.ashx>.

⁹ See http://www.mypyramid.gov/pyramid/fruits_tips.html.

¹⁰ See <http://www.fruitsandveggiesmatter.gov/qa/index.html#14>. “**Does fruit juice count towards my recommended fruit intake?** While 100% juice can count towards your intake, the majority of your choices should be whole or cut-up fruits (fresh, frozen, canned, or dried). These fruit choices are better options because they contain dietary fiber. ½ cup (4 fluid ounces) of 100% fruit juice does count as ½ cup of fruit in meeting your requirements.” *Id.*

¹¹ See note 8, above.

Committee, “will maintain product palatability while still reducing intake of added sugars.”

So, who is right? “Go, Slow, Whoa” – with no sugar limit; CSPI – with its limit of no more than 35% sugar by weight; or IOM – with its recommendation of no more than 30 grams of total sugars per 8 oz serving, as an exception to its 35% of calories from sugar standard?

In our view what matters is having meaningful, science-based standards, meeting those standards, and using those standards as a basis from which further improvements may occur. All of the yogurts approved in our program are low-fat or non-fat ones and thus fall in the “Go” category.

Conclusion and Closing Remarks

The bottom line is that self regulation is working and is successful. Through our program, major candy companies are no longer advertising to kids. Further, dozens and dozens of products have been meaningfully reformulated or newly introduced to meet nutrition standards. Because of these reformulations, involving reductions in calories, fats, sodium or sugars, the nutritional profile of foods in child-directed advertising has improved significantly. Additionally, many of the participants’ advertised products or meals provide at least a half serving of a food group recommended for increased consumption (fruit, veg, low-fat dairy and whole grains) or are a good source of a nutrient shortfall¹² for children.¹³

I call all of these changes progress and explain why the answer to the question “Is Food Marketing to Children Getting Any Healthier” is YES. While we understand and appreciate exhortations for companies to keep improving the products they advertise to kids, that’s exactly what they have been doing!

¹² The nutrient shortfalls are: calcium, fiber, potassium, magnesium and Vitamin E.

¹³ This is based on a snapshot CFBAI took of the nutritional profile of participants’ ads on 54 hours of children’s programming in March of this year. 83% of the participant ads were for products that met our study criteria, and of the products, 67% met the study criteria. See CFBAI 2008 Report (published Oct. 2009), available at <http://www.bbb.org/us/children-food-beverage-advertising-initiative/>.