

July 14, 2011

Federal Trade Commission
Office of the Secretary, Room H-113 (Annex W)
600 Pennsylvania Avenue, N.W.
Washington, D.C. 20580

**Robert Wood Johnson Foundation
Center to Prevent Childhood Obesity**

Joseph W. Thompson, M.D., M.P.H.
Director, RWJF Center and
Arkansas Center for Health Improvement
Angela Glover Blackwell, J.D.
Principal Advisor, RWJF Center
CEO, PolicyLink

**Robert Wood Johnson Foundation Center to Prevent Childhood Obesity Comments on
Interagency Working Group on Food Marketed to Children: Proposed Nutrition Principles,
General Comments, and Proposed Marketing Definitions**

FTC Project No. P094513

The Robert Wood Johnson Foundation Center to Prevent Childhood Obesity (hereafter called the Center) is pleased to provide comments in response to the Interagency Working Group's (IWG) proposed nutrition principles for foods marketed to children. We believe that establishing a strong set of nutrition standards and marketing definitions for food marketed to children are critical in helping companies establish consistent marketing practices that promote healthful choices.

The Center is focused on identifying promising practices and policies that support efforts to address childhood obesity and views food marketing to children as an important area that must be addressed. Research from the Institute of Medicine (IOM) indicates that children and adolescents are exposed to a significant amount of food advertising and concludes that food and beverage advertising affects children's food preferences and choices, diets, and overall health.¹

As illustrated below, food advertising is pervasive, and many of the products marketed to children are high in saturated fat, sodium, and/or added sugars.

- Each year, food and beverage companies spend approximately \$2 billion marketing their products to children and adolescents, including expenditures for toy giveaways with fast-food meals.²
- In 2009, children aged 2-5 saw an average of 10.9 food-related ads per day, or an average of 4,000 ads annually. Children aged 6-11 saw an average of 12.7 food-related ads per day, or an average of 4,700 ads annually.³

1 Institute of Medicine. *Food Marketing to Children and Youth: Threat or Opportunity?* Washington, DC: The National Academies Press, 2006.

2 Federal Trade Commission. *Marketing Food to Children and Adolescents: A Review of Industry Expenditures, Activities, and Self-regulation.* Washington, DC: Government Printing Office, 2008.

3 Powell L, Schermbeck R, Szczypka G, Chaloupka F, Braunschweig C. "Trends in the Nutritional Content of TV Food Advertisements Seen by Children in the US: Analyses by Age, Food Categories and Companies." *Archives of Pediatrics and Adolescent Medicine*, In Press.



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- Companies market to children using a wide array of techniques in addition to television. These other techniques include, but are not inclusive of, radio, magazines, Internet, cell phones, smart phones and other mobile devices, product placement, licensed and equity characters, celebrity endorsements, video and other games, packaging, in-store displays, schools, fundraisers, toys, and event sponsorship.
- Studies show that the vast majority of marketed products remain high in calories, saturated fat, sodium, and added sugars. In addition, products marketed are often low in fruits, vegetables, whole grains, and key nutrients.^{4,5}
- Eighty-six percent of food and beverage ads seen by children in 2009, the latest data available, were high in saturated fat, sugar, or sodium.⁶

While current industry self-regulation through the Children's Food and Beverage Advertising Initiative (CFBAI) has led to some reductions in unhealthy food marketing to children and product reformulation, objective research shows that it has not substantially shifted the mix of food advertising to children to more nutritious products. In addition, data indicates that many companies are not fully committed to reducing child exposure to advertising for their least nutritious products.^{7,8,9}

The Center is particularly interested in efforts that seek to decrease disparities in childhood obesity among communities of color, impoverished areas, and regions disproportionately affected with higher rates of obesity. If implemented effectively and broadly, the IWG proposed nutrition principles and marketing definitions can have a significant impact on the health of all children, and especially those most impacted by unhealthy food marketing practices. Evidence shows that communities of color are disproportionately exposed to fast food marketing. One study found that African American children and teens saw a higher number of television advertisements for fast food than white children. Between 2003 and 2007, African American children and teens had more than double the rate of increase in exposure to fast food ads compared with their white counterparts.¹⁰

4 Kunkel D, McKinley C, Wright P. *The Impact of Industry Self-regulation on the Nutritional Quality of Foods Advertised on Television to Children*. Oakland, CA: Children Now, December 2009.

http://www.childrennow.org/uploads/documents/adstudy_2009.pdf.

5 Batada A and Wootan MG. *Better-For-Who? Revisiting Company Promises on Food Marketing to Children*. Washington, DC: CSPI, 2009.

6 Powell L, Schermbeck R, Szczypka G, Chaloupka F, Braunschweig C. "Trends in the Nutritional Content of TV Food Advertisements Seen by Children in the US: Analyses by Age, Food Categories and Companies." *Archives of Pediatrics and Adolescent Medicine*, In Press.

7 Kunkel D, McKinley C, Wright P. *The Impact of Industry Self-regulation on the Nutritional Quality of Foods Advertised on Television to Children*. Oakland, CA: Children Now, December 2009.

http://www.childrennow.org/uploads/documents/adstudy_2009.pdf.

8 Harris J, Weinberg M, Schwartz M, Ross C, Ostroff J, Brownell K. *Trends in Television Food Advertising: Progress in Reducing Unhealthy Marketing to Young People?* New Haven, CT: Yale Rudd Center for Food Policy and Obesity, 2010.

http://www.yaleruddcenter.org/resources/upload/docs/what/reports/RuddReport_TVFoodAdvertising_2.10.pdf.

9 *Trends in Television Food Advertising: 2011 Update*. New Haven, CT: Yale Rudd Center for Food Policy and Obesity, 2011.

http://www.yaleruddcenter.org/resources/upload/docs/what/reports/RuddReport_TVFoodAdvertising_6.11.pdf

10 Powell L, Szczypka G, Chaloupka F. "Trends in Exposure to Television Food Advertisements Among Children and Adolescents in the United States." *Archives of Pediatrics & Adolescent Medicine* 2010, vol.164(9): 794-802.

The Center supports the proposed nutrition principles and marketing definitions and provides the following suggestions and recommendations in response to the IWG's request for feedback.

General Recommendations

Timeline for Implementation: The Center disagrees with the suggested timeframe for implementation of the proposed nutrition principles. Given the focus, attention, and investment to the issue of childhood obesity over the last decade, with particular interest in food marketed to children, food companies have made strides and continue to reformulate their products and shift their product portfolios. In addition to company policies improving as part of CFBAI, many companies also sell their products in schools and have been reformulating to meet the increased emphasis on healthy options in the school setting. However, there are many companies, especially fast food and entertainment companies that have chosen not to take meaningful steps; these companies should not be rewarded with an overly generous timeframe for implementation. The Center urges the IWG to use a two-year timeframe for implementation of the final nutrition principles, with an exception for the sodium standard. We recommend a five-year timeframe for the final sodium standards, with a two-year benchmark for phasing-in the sodium standards.

Food Categories Most Heavily Marketed to Children: The IWG should make it more clear that the proposed nutrition principles apply to all foods marketed to children, not just to those foods that fall into the ten categories most heavily marketed to kids. While companies should focus their initial efforts on the ten categories of foods most heavily marketed to kids, all foods and beverages marketed to children should meet nutrition standards.

Recommendations on Specific IWG Nutrition Principles

Nutrition Principle A: Meaningful Contribution to a Healthful Diet

Food Based Approach: The Center supports the IWG's proposal to use a food-based approach to ensure that the foods marketed to children help them to achieve a healthful diet. By emphasizing foods that make a meaningful contribution to a healthful diet, the proposed principles stay true to the basic premise of the *Dietary Guidelines for Americans* that nutrient needs should be met primarily by consuming nutrient-dense foods. In addition, this proposal is consistent with other evidence-based recommendations, including the IOM's *Nutrition Standards for Foods in Schools: Leading the Way toward Healthier Youth* report.¹¹

Individual Foods, Main Dishes, and Meals (answers questions number six and number eight in "Questions for Comment"): The Center agrees with the IWG's proportionate increase in, and recommended amounts of, food group contributions for main dishes and meals.

¹¹ Institute of Medicine (IOM). *Nutrition Standards for Foods in Schools: Leading the Way toward Healthier Youth*. Washington, D.C.: The National Academies Press, 2007.

Food Categories

Protein Group (answers question number nine): The Center disagrees with the food groups identified by the IWG and recommends that the proposed food groups be more consistent with MyPlate and the *Dietary Guidelines for Americans*. Specifically, the Center recommends that the IWG combine fish, extra lean meat, poultry, eggs, nuts, and beans into one category, just as in MyPlate and the DGA.

Fruit Juice: The Center strongly recommends that the IWG make it clearer that only real juice counts towards the fruit category. IWG should specify that companies can market products that are 100 percent juice or 100 percent juice diluted with water or carbonated water, but not juice drinks with added sweeteners.

Fried Foods: The Center recommends that the IWG explicitly exclude fried foods from contributing to the positive nutritional value standard. The proposed principles specify that the meat that provides the positive nutritional value be extra lean and the dairy be low in fat. Similarly, the principles also should ensure that the poultry, fish, vegetables, or other foods not be deep-fat fried.

Water: The Center urges the IWG to indicate that water is exempt from Principle A. As written, water is currently in the same category as fruit juice and non-carbonated beverages. The IWG should specify that qualifying water beverages can be naturally flavored or carbonated, as long as they contain no added sweeteners. Water makes a vital contribution to nutrition and health and is important in efforts to reduce other high calorie beverages, especially sugar sweetened beverages like sodas and fruit drinks.

Options for Quantifying a Meaningful Contribution to a Healthful Diet: The Center strongly recommends Option 2 over Option 1, with an exception for whole grains. Option 2 bases minimum contributions to food groups on serving sizes. This approach is consistent with food group recommendations in the *Dietary Guidelines for Americans* and MyPlate. Both the *Guidelines* and MyPlate make food group recommendations based on household measurements, such as cups and ounces, making the translation easier than the proposed percentage calculation in Option 1. The Center also supports the use of the Reference Amount Customarily Consumed (RACC) to determine the minimum contribution that a food group would need to make in order to satisfy Principle A for an individual food. However, FDA should update the RACCs to make them more consistent with the portion sizes that Americans typically consume.

Whole Grain Recommendation Should be as a Percentage: The Center urges the IWG to base its whole grain recommendation on a percentage as per Option 1. As recommended, at least 50 percent of grains should be whole grain to satisfy Principle A. The Center is concerned that a recommendation based on ounces of whole grains, as proposed in Option 2, could lead to less desirable product reformulations. For example, under Option 2, a company might add more total grains to a product or meal in order to meet the whole grain minimum, resulting in the

product containing more refined grains and subsequently more calories. In addition, the Center urges the IWG to allow products listing a whole grain as the first ingredient to fulfill the IWG's whole grain recommendation.

Nutrition Principle B: Nutrients with Negative Impact on Health or Weight:

The Center supports the IWG's assertion that, in addition to making a meaningful contribution to the diet, foods that are marketed to children also should contain minimal quantities of nutrients that could negatively impact children's health and weight. We agree with the IWG that the four most important nutrients to limit are sodium, saturated fat, trans fat, and added sugars. We support the IWG's decision not to propose limits for total fat and dietary cholesterol.

Naturally Occurring Negative Nutrients: The Center agrees with the IWG's proposal to provide a general exclusion for nutrients naturally occurring in foods that count toward Principle A from the proposed limitations in Principle B.

Calorie Principles (answers questions number four and number 12): the Center strongly urges the IWG to include calorie limits for individual food items, main dishes, and meals for children and adolescents as part of the final nutrition principles. Given that obesity is one of the key issues that the marketing principles are meant to address, it is imperative that calorie limits be included as part of the nutrition standards. The Center supports the calorie ranges proposed by the Food Marketing Working Group as follows:

Calorie limits for children (ages 2-11 years):

- No more than 150 calories per serving as packaged or offered for sale for individual food and beverage items;
- No more than 350 calories per serving as packaged or offered for sale for main dishes (meal calories minus one side); and
- No more than 500 calories per meal.

Calorie limits for adolescents (ages 12-17 years):

- No more than 200 calories per serving as packaged or offered for sale for individual items;
- No more than 450 calories per serving as packaged or offered for sale for main dishes (meal calories minus one side and rounded); and
- No more than 670 calories per meal.

In order for calorie limits to have an impact, IWG should make it clear that the calorie standards apply to the products being marketed as well as depictions of those products, such as the serving sizes shown in television and print advertisements.

Conclusion:

We applaud the efforts of the IWG and support the strong, practical recommendations put forth. The Center stands ready to assist in advancing the guidelines to ensure that industry food marketing efforts aimed at children promote an array of healthy food and beverage options. We appreciate your consideration of our suggestions and to the release of the final recommendations by the end of 2011.

Sincerely,

Joseph W. Thompson, MD, MPH
Director, Robert Wood Johnson Foundation Center to Prevent Childhood Obesity

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