



July 14, 2011

Federal Trade Commission  
Office of the Secretary  
Room H-113 (Annex W)  
600 Pennsylvania Avenue, NW  
Washington, DC 20580

**Re: Interagency Working Group on Food Marketed to Children: Proposed Nutrition Principles:  
FTC Project No. P094513**

The American Cancer Society Cancer Action Network strongly supports the Interagency Working Group on Food Marketed to Children's (IWG's) Preliminary Proposed Principles to Guide Industry Self-Regulatory Efforts. The American Cancer Society Cancer Action Network<sup>SM</sup> (ACS CAN) is the nonprofit, nonpartisan advocacy affiliate organization of the American Cancer Society dedicated to eliminating cancer as a major health problem. ACS CAN supports legislative, regulatory, and policy efforts that will make cancer a top national priority. Our comments on the IWG's proposal that follow primarily focus on the proposed nutrition principles, although we also discuss general aspects of the proposal and provide brief comments on the marketing definitions.

Nutrition and physical activity factors, including overweight and obesity, contribute to one third of all cancer deaths.<sup>1</sup> Currently, approximately one in three children and adolescents are overweight or obese, and childhood overweight and obesity increase the risk of these conditions in adulthood. Overweight and obesity are clearly associated with increased risk for cancer of the breast (postmenopausal), colon, endometrium, esophagus and kidney.<sup>2</sup> There is also highly suggestive evidence of a link between overweight and obesity and cancers of the pancreas, gallbladder, thyroid, ovary, and cervix, and for multiple myeloma, Hodgkin's lymphoma, and aggressive prostate cancer.<sup>3</sup> As a result of this clear relationship diet and weight status have with certain types of cancer, ACS CAN supports multi-faceted population-based policy approaches to improving nutrition and physical activity by removing barriers, changing social norms, and increasing awareness.

ACS CAN applauds the IWG for developing proposed principles to guide industry self-regulatory efforts on the foods that they market to children and adolescents. Strong nutrition principles for food marketing are necessary to promote healthier choices to youth and to address the epidemic of childhood obesity. Reducing the marketing of unhealthy foods and beverages is an

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1 American Cancer Society. *Cancer Prevention and Early Detection Facts & Figures 2011*. Atlanta: American Cancer Society, 2011.

2 Ibid.

3 Ibid.

important strategy for reducing childhood obesity and creating an environment that supports healthy food choices. According to the Institute of Medicine (IOM), food and beverage advertising affects children's food preferences, purchase requests, beliefs, and short-term consumption.<sup>4</sup> The IOM found that food and beverage marketing practices geared to children and youth are out of balance with healthful diets and contribute to an environment that puts their health at risk.<sup>5</sup>

Food and beverage companies spend more than \$1.6 billion marketing their products to children and adolescents ages 2-17, 17 percent of their total marketing budget.<sup>6</sup> In order to promote the consumption of healthy foods and beverages that support achieving or maintaining a healthy weight and reducing the risk of cancer and other chronic diseases, strong nutrition principles are needed for foods and beverages that are marketed to children and adolescents.

While many companies already have their own nutrition standards for foods that they market to children developed through the Better Business Bureau's Children's Food and Beverage Advertising Initiative (CFBAI),<sup>7</sup> this program of voluntary self-regulation, which allows companies to set their own nutrition standards and marketing criteria, does not replace the need for strong, uniform nutrition standards for foods and beverages that can be marketed to youth. Since CFBAI allows companies to develop their own self-interested nutrition standards, many are weak, contain strategic loopholes to allow specific unhealthy products in their brand to continue to be marketed, and do not apply to all forms of marketing or marketing directed toward adolescents age 12-17. As a result, participating in CFBAI allows the 17 participating companies to market foods and beverages that may be high in sugar, salt, saturated fat, or calories to children under the pretense of them being healthy.

For example, General Mills' nutrition standards allow it to market to children Trix and Lucky Charms,<sup>8</sup> both of which have too much sugar<sup>9</sup> to meet the IWG's proposed nutrition principles. Campbell's allows itself to market SpaghettiOs,<sup>10</sup> which contains double the final sodium limit<sup>11</sup>

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4 Institute of Medicine. Committee on Food Marketing and the Diets of Children and Youth. *Food Marketing to Children and Youth: Threat or Opportunity?* 2006. Washington, DC: National Academies Press.

5 Ibid.

6 Federal Trade Commission. *Marketing Food to Children and Adolescents: A Review of Industry Expenditures, Activities, and Self-Regulation*. Report to Congress. July 2008.

7 Better Business Bureau. Children's Food and Beverage Advertising Initiative. Available at <http://www.bbb.org/us/children-food-beverage-advertising-initiative/>.

8 Better Business Bureau, 2011. BBB Children's Food and Beverage Advertising Initiative: Food and Beverage Products that Meet Participants' Approved Nutrition Standards.

9 Based on product nutrition information on the company's website at

<http://www.generalmills.com/ColorBoxImage.aspx?ImageId={F23C60BD-7472-47FB-BBEA-0F73D47EB6CF}&Width=814&Height=395> and

<http://www.generalmills.com/Home/Brands/Cereals/LuckyCharms/Brand%20Product%20List%20Page.aspx>.

10 Better Business Bureau, 2011. BBB Children's Food and Beverage Advertising Initiative: Food and Beverage Products that Meet Participants' Approved Nutrition Standards.

for main dishes and meals proposed by the IWG. Kraft Foods' standards allow the company to market to children Kool Aid Singles,<sup>12</sup> which contains 7g sugar per 8g serving.<sup>13</sup> The product only meets the company's own standards because the single-serving size pouch is actually two servings. It is particularly concerning that these products are not only allowed to be marketed directly to children under 12 through the CFBAI, but they can be marketed as "better-for-you" foods.<sup>14</sup>

We strongly believe that strong, science-based, uniform nutrition standards for foods and beverages marketed to children and adolescents are needed in order to significantly improve the nutrition of foods and beverages marketed to youth. We urge the IWG to develop strong final nutrition principles for foods and beverages marketed to children and for industry to swiftly adopt the final principles.

### **Summary of ACS CAN Comments on IWG Proposal**

Overall, ACS CAN strongly supports the IWG's proposed nutrition principles for foods and beverages marketed to children and adolescents. We are pleased that they are largely consistent with the American Cancer Society *Guidelines on Nutrition and Physical Activity for Cancer Prevention*<sup>15</sup> and the 2010 *Dietary Guidelines* and believe that they should apply to all foods and beverages marketed to children and adolescents. We also strongly support the proposed requirement that foods marketed to youth both provide a meaningful contribution to a healthful diet (meet Principle A) and limit nutrients that have a harmful impact on health or weight (meet Principle B). We strongly encourage the addition of calorie limits for all foods and beverages. We also recommend that water be allowed to be marketed, but fried foods and processed meats be explicitly prohibited.

We support the proposed inclusion in the definition of marketing targeting children and adolescents of all 20 categories of advertising, marketing, and promotional activities identified by the Federal Trade Commission.<sup>16</sup> We also strongly support applying the IWG's nutrition principles and definitions to all types of marketing targeting children or adolescents, ages 2-17. We strongly recommend the addition of a brand marketing standard requiring that more than half of sales be from products meeting the nutrition principles for the brand to be marketed to youth.

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11 Based on product nutrition information on the company's website at <http://www.campbellwellness.com/product-collection.aspx?brandCatID=768&brandID=10&productID=11734&catID=347>.

12 Better Business Bureau, 2011. BBB Children's Food and Beverage Advertising Initiative: Food and Beverage Products that Meet Participants' Approved Nutrition Standards.

13 Based on product nutrition information on the company's website at <http://www.kraftrecipes.com/Products/ProductInfoDisplay.aspx?SiteId=1&Product=4300002347>.

14 Better Business Bureau, 2011. BBB Children's Food and Beverage Advertising Initiative: Food and Beverage Products that Meet Participants' Approved Nutrition Standards.

15 Kushi LH, Byers T, Doyle C, et al. American Cancer Society Guidelines on Nutrition and Physical Activity for Cancer Prevention. *CA Cancer J Clin* 2006; 56:254-281.

16 Federal Trade Commission, 2008.

Finally, we recommend that the timeline for implementation be accelerated and challenge industry to adhere to the final nutrition principles within two years of their publication.

Comments on specific provisions of the IWG's proposal are contained in the sections that follow.

## **Comments on Specific Provisions**

### **Food Categories Most Heavily Marketed to Children**

The IWG should clarify that the proposed nutrition principles apply to all foods marketed to children and adolescents, not just to those foods that fall into the ten categories most heavily marketed to youth. However, we agree that companies should especially focus on and start with the ten categories of foods most heavily marketed in their marketing and reformulation efforts.

While companies are currently marketing certain products more frequently than others, that mix of products might change if the IWG principles applied only to specified foods. It is essential that all foods and beverages marketed to children meet nutrition standards.

### **Individual Foods, Main Dishes, and Meals**

We support the IWG's proportionate increase in, and recommended amounts of, food group contributions for individual foods, main dishes, and meals. These requirements should help to ensure that main dishes and meals contribute to healthy eating patterns and include more of the foods that children and adolescents typically under-consume, such as fruits, vegetables, and whole grains.

### **Nutrition Principle A: Meaningful Contribution to a Healthy Diet**

ACS CAN supports the IWG's proposed requirement that foods and beverages marketed to children provide a meaningful contribution to a healthful diet by providing significant amounts of fruits, vegetables, whole grains, fat-free or low-fat milk products, fish, extra lean meat or poultry, eggs, nuts and seeds, or beans. We support 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 are consistent with recommendations of both the 2010 *Dietary Guidelines* and the *American Cancer Society Guidelines on Nutrition and Physical Activity for Cancer Prevention* (ACS Guidelines)<sup>17</sup> to consume nutrient-dense foods in portions that help to achieve or maintain a healthy weight.

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17 Kushi LH, Byers T, Doyle C, et al. American Cancer Society Guidelines on Nutrition and Physical Activity for Cancer Prevention. *CA Cancer J Clin* 2006; 56:254-281.

### **Listed Food Groups**

While we agree that the “listed food groups” are ones that make a meaningful contribution to a healthy diet, we recommend that fish, extra lean meats or poultry, eggs, nuts and seeds, and beans be combined into a single “protein group”. The 2010 *Dietary Guidelines* has a single “protein foods” category, which includes seafood, meat, poultry, eggs, beans and peas, soy products, nuts, and seeds. Therefore, all of these types of foods should be in the same listed food group for the nutrition principles. In addition, protein is not a nutrient of concern in the U.S. population and creating several groups for protein sources overemphasizes protein. Under the IWG’s current proposal, a “meal” could include 3 sources of protein – fish, meat, and eggs - and still meet Principle A without including any other food groups, such as fruits, vegetables, or whole grains, that the *Dietary Guidelines* recommends be increased.

With respect to the “fruit” and “vegetable” food groups, we support allowing juice to count toward Principle A, but only if it is 100 percent juice or diluted juice with no added caloric sweeteners. Juice with added sugar should not count toward Principle A. While 100 percent juice provides nutrients, it is also a calorically-dense way of consuming fruits and vegetables. Given that the *Dietary Guidelines* and the ACS Guidelines recommend consuming whole fruits and vegetables over juice, we recommend that serving sizes for juice that is marketed to youth be limited to 4 ounces for children ages 2-11 and 8 ounces for ages 12-17. These are the serving sizes recommended by the IOM for juice that is sold or served in schools outside of the school meal programs for elementary/middle and high schools, respectively.<sup>18</sup>

### **Approaches for Quantifying What Constitutes a Significant Contribution from the Listed Food Groups**

ACS CAN recommends using Option 2 over Option 1 to quantify what constitutes a significant contribution from the listed food groups, except for whole grains. Option 2 bases minimum contributions of food groups on serving sizes, which is consistent with food group recommendations in the *Dietary Guidelines* and MyPlate. Both make food group recommendations based on household measurements, such as cups and ounces. It is difficult to translate those serving size recommendations into meaningful percentages.

In addition, it can be hard to determine a product's ingredients by percentages, as is proposed under Option 1. Even if one can, it is difficult to understand how those percentages relate to the food group serving size recommendations used in the *Dietary Guidelines* and MyPlate. For example, under Option 1, a tablespoon of ketchup that is made up of 50 percent tomatoes would qualify as a vegetable. However, ketchup does not make a meaningful contribution to a child’s vegetable intake. Likewise, a few tablespoons of yogurt dip with fruit in a restaurant children's meal would not do much to help a child meet the recommended servings of dairy.

In the case of whole grains, we recommend that option 1 be used. In order to meet Principle A, a grain product should be required to have at least 50 percent of its grains by weight be whole

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<sup>18</sup> Institute of Medicine. *Nutrition Standards for Foods in Schools: Leading the Way toward Healthier Youth*. Washington, D.C.: The National Academies Press, 2007.

grains, consistent with the Food and Drug Administration's (FDA's) requirement for making a whole grain health claim. Allowing only those grain products that are at least 50 percent whole grain to be marketed may help youth not only increase whole grain intake, but also encourage them to replace some refined grains with whole grains. In addition, a recommendation based on ounces, as proposed under Option 1, rather than on a percentage, of whole grains could lead to less desirable product reformulations. For instance, 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 more calories.

As part of the whole grain requirement, the IWG should also include a fiber requirement. We recommend that the IWG require that a serving of grains contain at least 1.1g of fiber per 10g carbohydrate or use the definition of a "good source" of fiber from the FDA and require a serving of whole grains to contain at least 10 percent of the Daily Value for an individual food item, main dish, or meal to meet the standard for whole grains under Principle A. The 2010 *Dietary Guidelines* lists dietary fiber as a nutrient of concern and recommends that Americans consume more fiber in order to reduce their risk of obesity and other diet-related health conditions.

### ***Water***

ACS CAN recommends that water be exempt from Principle A. Water does not contribute to any of the food groups, but it makes a vital contribution to nutrition and health and should be allowed to be marketed. The IWG should specify that allowable water beverages can be flavored or carbonated, as long as they contain no added caloric sweeteners.

### ***Fried Foods***

We recommend that fried foods be explicitly excluded from meeting Principle A. Deep frying foods adds calories, without providing any nutritional benefit. Fried chicken, chips, and fried potatoes are all among the top 20 sources of calories in children and adolescents' diets.<sup>19</sup> The IWG's proposal specifies that meat or poultry must be extra lean and dairy products must be fat-free or low-fat to satisfy Principle A. Similarly, no food, including meats, grains, or vegetables, should be allowed to be fried for it to count as providing a positive nutritional benefit.

### ***Processed Meats***

Like fried foods, we also recommend that processed meats be explicitly excluded from meeting Principle A. Many epidemiologic studies have examined the association between cancer and the consumption of processed meats (such as cold cuts, bacon, and hot dogs, etc.) that are nitrite- or nitrate-cured. Current evidence supports an increased risk of colon, rectum, and possibly prostate cancer associated with long-term, regular consumption of even small

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19 U.S. Department of Health and Human Services and U.S. Department of Agriculture. Table 2-2. Top 25 Sources of Calories Among Americans Ages 2 Years and Older, NHANES 2005-2006. *Dietary Guidelines for Americans 2010*. Available at [www.dietaryguidelines.gov](http://www.dietaryguidelines.gov).

amounts of these types of meat products.<sup>20</sup> As a result, the ACS Guidelines recommend limiting consumption of processed meats and we believe that they should not be marketed to children and adolescents.

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

ACS CAN supports requiring that foods marketed to children not exceed limits for nutrients that have a negative impact on health or weight. We support requiring that saturated fat, trans fat, added sugar, and sodium be limited and strongly recommend the addition of a limit on calories.

#### ***Calorie Limits***

ACS CAN strongly recommends that there be calorie limits under Principle B for individual foods, main dishes, and meals that are allowed to be marketed to children. The IWG makes clear that obesity is one of the key issues that the marketing principles are meant to address. Calories are the key dietary contributor to obesity. Both the ACS Guidelines and 2010 *Dietary Guidelines* stress the importance of energy balance for weight maintenance and underscore the fact that obesity results from caloric imbalance, not nutrient imbalance, per se. Furthermore, the charge of the IWG in the 2009 Omnibus Appropriations Act requires the IWG to consider calories and portion size. However, these were not addressed in the IWG's proposal. The *Dietary Guidelines* specifically recommended that people focus on portion sizes and eat less. Setting limits on calories would also help to ensure that products are marketed and sold in appropriate serving sizes.

Consistent with estimated daily calorie needs for sedentary children ages 2-11 and adolescents ages 12-17 from the 2010 *Dietary Guidelines* and with recommended calorie limits for individual food items for children and adolescents from the Institute of Medicine<sup>21</sup> and the Alliance for a Healthier Generation's Competitive Foods Guidelines for K-12 schools,<sup>22</sup> we recommended that the IWG set the following limits on calories for foods and beverages that are marketed to youth:

#### **Recommended 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 300 calories per serving as packaged or offered for sale for main dishes,
- No more than 450 calories per meal.

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20 World Cancer Research Fund and American Institute for Cancer Research. 2007. *Food, Nutrition, Physical Activity, and the Prevention of Cancer: A Global Perspective*. Washington, DC: AICR. <http://www.dietandcancerreport.org/?p=ER>.

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

22 Alliance for a Healthier Generation. *Competitive Foods Guidelines for K-12 Schools*. Washington, D.C.: Alliance for a Healthier Generation, 2009.

### **Recommended 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,
- No more than 650 calories per meal.

The recommended calorie limits for meals for children were determined by dividing the average total calorie needs per day for sedentary children ages 2-11 years old, based on the *Dietary Guidelines* (1,400 calories),<sup>23</sup> by three meals per day, assuming three meals and no snacks are consumed. The recommended calorie limit for meals for adolescents was determined by calculating one-third of a 2,000 calorie diet. Calorie limits for main dishes were determined by subtracting the calorie limit for an individual food item from the calorie limit for a meal. The resulting numbers were then rounded. Given that youth may eat at least one snack in addition to three meals per day, the calorie limits suggested above are generous.

The IWG should also clearly state that the calorie standards apply not only to the products being marketed, but also to depictions of those products, such as the serving sizes shown in television and print advertisements. Industry should ensure that portion sizes of foods and beverages depicted in marketing messages meet the calorie standards.

### ***Saturated Fat***

ACS CAN recommends lowering the proposed target for saturated fat in individual foods from 1 gram or less per Reference Amount Customarily Consumed (RACC) and 15 percent of calories to 10 percent of calories. The 2010 *Dietary Guidelines* recommends that no more than 10 percent of calories come from saturated fat. Lowering the saturated fat limit for individual food items would bring it in line with the *Dietary Guidelines*, as well as the proposed saturated fat targets for main dishes and meals.

### ***Trans Fat***

ACS CAN supports the IWG's proposed target for trans fats of 0g, which is the amount recommended by the *Dietary Guidelines*.

### ***Added Sugars***

ACS CAN supports the IWG's proposal to include added sugars among the nutrients to limit under Principle B. We strongly support the IWG's decision to establish parameters for added

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<sup>23</sup> Calculated as the average of daily calorie needs for sedentary males and sedentary females each of ages 2-11 to determine children's daily calorie needs and for each of ages 12-17 for adolescents' daily calorie needs, rounded to the nearest 200 calories. Based on U.S. Department of Agriculture and U.S. Department of Health and Human Services. Appendix 6. Estimated Calorie Needs Per Day By Age, Gender, and Physical Activity Level (Detailed). *Dietary Guidelines for Americans 2010*. Available at [www.dietaryguidelines.gov](http://www.dietaryguidelines.gov).



sugars rather than for total sugars, since it is the added sugars in foods and beverages that are implicated in increasing levels of overweight and obesity, and because the *Dietary Guidelines* specifically recommends reducing intake of added sugars. Many products marketed to children contain excess amounts of added sugars. We support the proposed limit for added sugars.

Given that added sugars are not listed separately from total sugars on food labels, we recognize the potential difficulty in assessing compliance with the proposed limits on added sugars. Therefore, we strongly recommend that the FDA work to require that added sugars be listed on the Nutrition Facts panel on packaged foods. Additionally, that would allow consumers to know how much added sugar a food or beverage contains and better assess the relative healthfulness of foods and beverages.

### ***Sodium***

We support the IWG's assertion that the food industry should work to significantly reduce the amount of sodium in food products marketed to children over time. While we acknowledge that the large majority of foods and beverages marketed to children and adolescents do not meet the proposed sodium targets and the difficulties inherent in reformulating products to reduce sodium, we urge industry to work swiftly to comply with the final sodium targets within two years if possible, and no later than five years following publication of the IWG's final nutrition principles. While it may take industry longer than our proposed timeframe to reformulate all of the products that they currently market to youth to meet the final sodium limits under Principle B, they can stop marketing those products that do not meet the principles in the interim, while working on reformulation.

### ***Foods With a Small RACC***

We support the proposed adjustments to the targets for the nutrients to limit under Principle B for foods with a RACC of 30 g or less. It is important that the proposed limits for added sugars, saturated fat, and sodium be reduced to a proportional level for foods with a small serving size.

### ***Naturally Occurring Nutrients***

We support the IWG's proposal that nutrients naturally occurring in foods that count toward a meaningful contribution under Principle A do not count toward the proposed limits for those nutrients under Principle B. We agree that otherwise healthy foods, such as low-fat dairy products, nuts, and nut butters, without added sugars or sodium, should not be excluded from being marketed to children because they contain high levels of saturated fat, for example, that is naturally contained in these products.

### **Proposed Definition of Marketing Targeted to Children and Adolescents**

We support the IWG's proposal to apply the nutrition principles to all 20 categories of advertising, marketing, and promotional activities identified by the Federal Trade Commission (FTC) in their 2008 Report to Congress, *Marketing Food to Children and Adolescents*.<sup>24</sup>

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<sup>24</sup> Federal Trade Commission, 2008.

According to the FTC's report, in 2006, the most recent year for which data is available, just over half (53%) of the \$1.6 billion that food and beverage companies spent on advertising, marketing, and promotional activities was spent on television, radio, and print marketing, with new media, including Internet, digital, and viral marketing, becoming increasingly important. Premiums and prizes, fast food restaurant toys, packaging and in-store displays were also frequently used to market foods and beverages to children and adolescents, with annual spending for each totaling in the hundreds of millions of dollars.<sup>25</sup> It is important that the nutrition principles apply to all of forms of advertising, marketing, and promoting foods and beverages to children and youth.

### **Applicability of Nutrition Standards to Children and Adolescents**

ACS CAN strongly supports applying the IWG's nutrition principles and definitions to marketing that targets both children ages 2-11 and adolescents ages 12-17. As the IWG notes, Congress directed the agencies to consider marketing to all youth ages 17 and under. Applying the nutrition principles to all foods and beverages marketed to children and adolescents is important for public health reasons. High rates of overweight and obesity exist for both children and adolescents, with 16.9 percent of all youth ages 2-19 considered obese.<sup>26</sup> In fact, the prevalence of obesity for adolescents ages 12-19 is 74 percent greater than the prevalence of obesity among younger children, ages 2-5.<sup>27</sup> The increase in obesity rates over the last three to four decades has also been greater for older children and adolescents than for younger children. While the prevalence of obesity among children ages 2-5 has doubled during that time period, the prevalence of obesity among older children ages 6-11 and adolescents ages 12-19 has approximately tripled.<sup>28</sup> While adolescents may be better able than children to discern marketing messages from other types of information, they also have more autonomy over their food purchase and consumption decisions. As adolescents transition from childhood to adulthood and learn how to make healthy choices, it is important that they not be bombarded with marketing messages for unhealthy foods and beverages.

### **Brand Marketing**

We strongly recommend that a standard for brand marketing be added to the nutrition principles. Currently, many companies focus their youth marketing strategy on promoting a line of products, a brand within the company, or a whole company, rather than specific food and beverage products. For example, a company may use a cartoon character or logo to promote an entire line of products, even if only products that meet nutrition standards or no food or beverage products at all are shown in the actual ad. Alternatively, an ad may

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25 Ibid.

26 Ogden C and Carroll M. *NCHS Health E-State: Prevalence of Obesity Among Children and Adolescents: United States, Trends 1963-1965 Through 2007-2008*. Division of Health and Nutrition Examination Surveys, National Center for Health Statistics, Centers for Disease Control and Prevention. June 4, 2010. Available at [http://www.cdc.gov/nchs/data/hestat/obesity\\_child\\_07\\_08/obesity\\_child\\_07\\_08.htm#table1](http://www.cdc.gov/nchs/data/hestat/obesity_child_07_08/obesity_child_07_08.htm#table1).

27 Ibid.

28 Ibid.

encourage youth to go to a restaurant or store in which the majority of food and beverage products for sale do not meet the nutrition principles.

Brand marketing provides a loophole for industry to indirectly market foods and beverages that do not meet the nutrition principles to young people. We suggest that a brand marketing standard be based on the percentage of the company's sales that comes from products that meet the nutrition principles. We recommend that industry only market a particular line of products, brand within a company, or a whole company if more than half of the sales from products within the product line, brand, or company marketed comes from products that meet the nutrition principles. For example, a beverage company would only advertise their brand to youth if more than half of their sales come from beverages meeting the nutrition principles. Similarly, a fast food company would only advertise their children's meals to youth if more than half of children's meals sold meet the nutrition principles. Although we recommend that companies not engage in brand marketing targeting youth unless more than half of their food and beverage sales comes from products or meals meeting the nutrition principles, ideally companies that market their brand to youth would have nearly all of their food and beverage sales coming from products meeting the nutrition principles. Using a percentage of sales standard for brand marketing is preferable to using a standard based on the percentage of products available for sale meeting the standard because it would then be too easy for companies to introduce, but not market, healthy products simply to allow them to comply with a brand marketing standard.

### **Timeline for Implementation**

ACS CAN recommends that industry work to comply with the nutrition principles developed by the IWG within two years following publication of the final principles. We believe that the 2016 target for implementation of the principles is overly generous and the 2021 target for implementation of the final sodium standards is excessive and even dangerous to public health. We cannot wait an entire generation of youth before pressuring industry to change their food and beverage marketing practices to promote healthy options.

Changing marketing practices to promote healthy options would not be too challenging for industry to achieve within a shortened time frame. They have known since the passage of the Congressional directive in the 2009 Omnibus Appropriations Act that the IWG would be developing recommended nutrition standards for food marketing to children and adolescents. Also, many companies have already set their own voluntary standards for foods and beverages that they market to youth. In addition, many companies have already begun developing healthier product lines or reformulating existing recipes in response to increased attention to the obesity problem and consumer demand for healthier options. For those companies that have not already taken these steps and may need more than two years to reformulate some products, they could simply stop marketing to youth products that do not meet the nutrition principles until reformulation is complete.

## Conclusion

Overall, ACS CAN strongly supports the IWG's proposed nutrition principles for foods marketed to children and adolescents and urges the IWG to release strong final principles for all foods and beverages marketed to youth ages 2-17. To further strengthen the principles, we strongly recommend that calorie limits and a brand marketing standard based on the percentage of sales from products meeting the nutrition principles be added and that the final principles be adopted by industry within two years. Industry has a pivotal role to play in reducing obesity and creating an environment that supports healthy food and beverage choices. Marketing only healthy options to children and adolescents is a key way that industry can exercise responsibility and help to move toward a future with healthier youth, less obesity, and less cancer.

Thank you for your consideration of our recommendations. If you have any questions or we can provide any additional information, please contact Melissa Maitin-Shepard at [Melissa.maitin-shepard@cancer.org](mailto:Melissa.maitin-shepard@cancer.org) or 202-585-3205.

Sincerely,

Stephen Finan //  
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American Cancer Society Cancer Action Network