



National Policy & Legal Analysis Network to Prevent Childhood Obesity

White Papers from Annual Symposium November 2012

On April 26 and 27, 2012, the National Policy and Legal Analysis to Prevent Childhood Obesity (NPLAN) held a planning symposium in San Francisco. Funded by the Robert Wood Johnson Foundation (RWJF), NPLAN is a program of ChangeLab Solutions and provides legal and policy technical assistance to RWJF's partners and grantees.

Following the symposium, participants developed white papers based in part on discussions in the breakout sessions. These papers summarize thoughtful discussion and analysis on four issue areas that are aligned with RWJF's overall childhood obesity prevention strategy:

- 1) **Competitive Food in Schools: Strategies to Create Healthy School Environments**
Lisa Sharma Creighton, Senior Program Coordinator, National Education Association – Health Information Network
- 2) **Promoting Safe Routes to School Programs in Low-Income Communities and Communities of Color: Challenges and Opportunities**
Gina Chirichigno, Co-Director, One Nation Indivisible and Sara Zimmerman, Senior Staff Attorney, ChangeLab Solutions
- 3) **Sugar-Sweetened Beverage Taxes: What Do We Need to Win?**
Roberta Friedman, Director of Public Policy, Yale Rudd Center for Food Policy and Obesity and Christine Fry, Senior Policy Analyst, ChangeLab Solutions
- 4) **Memo: Marketing Unhealthy Food to Children**
Lori Dorfman, Director, Berkeley Media Studies Group

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Competitive Foods in Schools: Strategies to Create Healthy School Environments

Schools Breakout Session Report, NPLAN Symposium, April 2012

Introduction

The National Policy & Legal Analysis Network to Prevent Childhood Obesity (NPLAN), a program of ChangeLab Solutions, held a planning symposium in San Francisco on April 26–27, 2012. One of the breakout sessions addressed strategies to improve the nutritional quality of snack foods and beverages sold in schools in vending machines, food courts, à la carte lines, and snack bars (so-called “competitive foods” because they compete with the federal school meal programs). The focus of the discussion was on federal standards, coordinated school health, and state and local policy strategies to address the issue. The purpose of such policies is to set nutritional standards for competitive foods and thus create healthier, “non-obesogenic” school environments for students. Using the breakout discussion as a starting point, this paper explores key strategies at the federal, state, and local levels that can guide advocates on how to work with the education community to eradicate junk foods and beverages from schools.

Competitive Foods in Schools: Federal Efforts

As it currently stands, the regulations for the National School Lunch Program (NSLP) and the School Breakfast Program (SBP) do not prohibit the sale of foods in competition with reimbursable meals as long as those foods are not considered to be “foods of minimal nutritional value.” In fact, current federal standards are not much different from when the NSLP was enacted in 1946, at which time the U.S. Department of Agriculture (USDA) decided not to regulate the sale of competitive foods due to the difficulty of accountability and enforcement. It is unclear when exactly the sale of competitive foods in schools started; however, based on newspaper accounts from the early 1960s about the use of candy sales to raise funds for athletic uniforms and articles from the 1970s documenting the presence of candy machines in elementary schools, the practice has at least a 40-year history.¹

Over the past four decades, regulation of the nutritional quality of competitive foods and beverages in schools has remained a hot-button issue.

History of Competitive Food and Beverage Regulations in Schools²	
1946	National School Lunch Act is passed.
1966	Child Nutrition Act is passed, requiring the USDA to develop nutrition guidelines for the National School Lunch Program.
1970	Child Nutrition Act is amended to grant USDA authority to regulate competitive foods sold in schools. Regulations prevent the sale of soft drinks and candy during lunch periods.
1972–1973	National Soft Drink Association (now the American Beverage Association) introduces an amendment to eliminate restrictions on soft drink and candy sales. USDA authority is revoked.

1973	Hearings on vending machine competition with NSLP show that competitive food sales are causing a loss of school meal revenue, as well as a negative impact on student nutrition.
1973–1975	Bills to restore USDA authority over competitive foods fail; the presence of competitive foods in schools continues to increase.
1977	USDA authority to regulate competitive foods is restored.
1979–1985	Amended rule establishes a category for “foods of minimal nutritional value,” which is battled in court but ultimately issued in 1985.
2001	USDA report to Congress, “Foods Sold in Competition with USDA School Meal Programs: A Report to Congress,” finds that competitive foods are hurting the nutritional integrity of, and student participation in, the school meal programs.
2004	Child Nutrition Reauthorization Act requires all local school districts to establish wellness policies by the 2006–2007 school year.
2006	Alliance for a Healthier Generation, through its Healthy Schools Program, releases model standards for competitive foods in schools.
2007	Institute of Medicine releases model standards for competitive foods in schools.
2010	Healthy, Hunger-Free Kids Act is passed, requiring the USDA to set standards for all foods sold in schools.

Most recently, in 2010, Congress passed the Healthy, Hunger-Free Kids Act, which among other elements requires the USDA to update the nutrition standards for competitive foods and beverages. The draft standards, the first update in more than 30 years, were slated for release in December 2011. As of the publication of this paper, draft standards have still not been released. As we await the release of the USDA’s proposed rule for competitive foods, there are concerns regarding the effect of the outcome of the 2012 presidential election on the strength and breadth of final USDA standards.

Until final standards are released, schools without state statutes are only required to follow current federal standards for “foods of minimal nutritional value” (FMNV), defined as foods that provide less than 5 percent of the recommended daily allowance of any of eight nutrients (protein, vitamin A, vitamin C, niacin, riboflavin, thiamin, calcium, and iron). FMNV includes items such as soda water, water ices, chewing gum, and certain candies, which according to federal law cannot be sold in the food service area during lunch periods. Any foods providing at least 5 percent of one of the eight nutrients can be sold in schools at any time.

While battles are waged over federal regulations, the presence of competitive foods and beverages in schools continues to increase. Between 1991 and 2008, the percentage of middle schools with vending machines increased from 42 percent to 77 percent and the percentage of high schools from 76 percent to 96 percent.³⁻⁴ Today, competitive foods are widely available in public schools in the United States. Data from 2008 shows that 92 percent of high school students and 81 percent of middle school students could buy food or drinks from à la carte lines in school cafeterias.⁴ And data from 2010 shows that 65 percent of elementary school students could buy food or drinks outside of school meals through à la carte lines, vending machines, or school stores.⁵

The confluence of the increasing presence of competitive foods in schools and a lack of strong federal standards has spurred states and local school districts to take action and implement their own policies to address the issue.

Competitive Foods in Schools: State Efforts

As of 2011, 35 states and the District of Columbia have established nutritional standards for competitive foods and beverages.⁶ However, state standards range greatly, with only eight meeting or exceeding the 2005 Dietary Guidelines for Americans.²

New research on the capacity of state competitive food laws to influence childhood obesity rates shows very promising results, and may serve to bolster state policy efforts nationwide. A 2012 study by Daniel Taber et al. at the University of Illinois at Chicago found that “laws that regulate competitive food nutrition content may reduce adolescent BMI change if they are comprehensive, contain strong language, and are enacted across grade levels.”⁷ However, it can be a challenge to enact state laws that are sufficiently comprehensive and expansive.

Enacting Strong State Policy: Barriers to Success

Along with the “usual industry suspects,” education groups, particularly those representing leadership roles, can be potential opponents to competitive food legislative efforts. Alternatively, non-administrative education groups, such as school employee unions, are often fence sitters on competitive food legislative efforts due to either a lack of knowledge about the issue or current state policy efforts. Educators’ primary focus is education, not nutrition. While many educators and administrators realize the importance of nutrition and health, concerns about school budgets, overburdened staff, student academic achievement, and managing student behavior often outweigh all other concerns. Education groups’ opposition to competitive food laws typically stems from concerns about lost school revenue and the use of staff time to ensure compliance with the new law.

Potential Opponent	Rationale
Food and beverage industry (soft drinks, candy, dairy, snack foods, vending)	Restricting the sale of competitive foods impinges upon the rights and choices of children; everything in moderation
State school board association	Revenue loss concerns; students will buy snack food outside school if it’s unavailable inside the building
State school food service association	Revenue loss concerns; compliance/monitoring
State school administrators	Revenue loss concerns; compliance/monitoring

The good news is, history shows that education groups can be turned from opponents into supporters of strong competitive food standards through targeted outreach, education, and support with messaging (i.e., California SB 19 and SB 12).⁸ Advocates’ key to success is their ability to translate research into a clear and convincing message and to present a reasonable and justifiable policy solution that is based in research and science with evidence the policy will work (e.g., pilot program or data from another state/district).⁹

For example:

- **Problem:** Childhood obesity rates have tripled over the past 30 years. Schools are part of the problem—soda and junk food are widely available for sale in public schools.
- **Effect:** The current generation of children could be the first in U.S. history to live sicker and die younger than their parents.
- **Policy solution:** Research shows that strong, comprehensive state nutritional standards for competitive foods can prevent student obesity. It’s time to get schools out of the junk food business.

A stronger example, from the hunger arena, has been hugely successful in promoting policy efforts to address child hunger in places like New Mexico, Arkansas, and Washington, DC:

- **Problem:** One in four children—nearly 17 million—in the United States live in homes without access to enough nutritious food to live a healthy life.
- **Effect:** A wide body of research shows that child hunger has negative effects on student academic performance and behavior in school.
- **Policy solution:** Research shows that eating breakfast at school improves academic achievement, especially in vocabulary, math, and standardized tests. Serving breakfast in the classroom dramatically increases participation in school breakfast, thus maximizing fiscal benefits for schools. State laws requiring breakfast in the classroom at low-income schools will help end child hunger and improve academic and financial outcomes for schools.

As evidenced above, the research base for the effects of hunger on student behavior and academic achievement, and the influence of school breakfast participation on school revenue, is much stronger than related research on obesity. This speaks to the need to further build the research base around the effect of competitive foods on outcomes of most interest to school staff and administrators. Once the research base is established, both traditional and unconventional allies and supporters can be utilized to promote messaging and bolster policy efforts.

Potential Allies and Supporters	
Traditional	Unconventional (<i>messaging</i>)
State health associations (cancer, diabetes, heart)	School employee unions, administrators, food service (<i>healthy children learn better</i>)
State medical associations (nurses, doctors, dietitians, dentists, health officers)	Anti-hunger groups (<i>competitive foods undermine school meal programs and stigmatize low-income students</i>)
State public health and food policy advocates	Local sports teams (<i>better nutrition improves athletic performance</i>)
State Parent Teacher Association (PTA)	Farm-to-School (<i>local produce and specialty items can replace junk foods and drinks</i>)
Student groups	Chefs (<i>cooking techniques transform healthy snacks into tasty treats</i>)

Enacting Strong State Policy: Messaging

Based on recent surveys, there is broad support for nutrition standards for competitive foods. A 2012 survey conducted on behalf of the Kids’ Safe & Healthful Food Project found that “80% of both voters and

public school parents support a national nutritional standard for competitive foods, including majorities who strongly favor it.”¹⁰ Furthermore, focus groups conducted in 2010 by the NEA Health Information Network found that school employees believe that policy can have an influence on school nutrition, and that policies to address school nutrition are important because of the link between student health and student learning.¹¹

What’s still missing is compelling messaging specifically tailored to the education community. Breakout group participants stressed the need to educate school employees by framing communications and messaging for this audience. To be effective, messaging needs to speak to how improving the school food environment fits within the many competing priorities of school employees. Messaging must also stress short-term rewards associated with policy compliance, be compelling and concise, and include a combination of both emotional and rational messages.

Messaging Examples

Problem: Administrators are awash in red tape and paperwork, stressed, and concerned with budget cuts, student achievement, and accountability to parents.

Solution: Focus on helping boost student achievement and increasing school revenue.

- Healthy foods can be profitable.
- Healthy school environments promote student success.
- Healthy students perform better academically.
- Schools are a place of learning and modeling healthy behaviors; selling junk food in schools is a confusing, disingenuous message to students.
- Providing only healthy food for students: it’s the right thing to do.
- Help parents raise healthy kids.

Problem: Teachers and school staff are overworked, stressed, underpaid, and concerned with budget cuts and accountability to parents.

Solution: Focus on making teachers’ jobs easier, reducing stress, and increasing school revenue.

- Healthy school environments promote student success.
- Healthy students are better behaved.
- Healthy students are better prepared to learn.
- Good nutrition helps brain function.
- Good nutrition helps student attentiveness and behavior.
- You cannot educate a sick child.
- Healthy foods can be profitable.

The development of compelling messaging warrants further thought and investigation; focus groups to test messages for acceptance and effectiveness may be useful. Once messages have been developed, advocates should look to other successful campaigns for guidance on disseminating the messages—especially those that use bold imagery and pop culture references for social change (e.g., CDC’s Zombie Preparedness campaign and American Legacy Foundation’s “truth” campaign).¹²⁻¹³

Compliance with State Policy: Methods

Once strong policies are enacted at the state level, their implementation and compliance at the local level is often a challenge. The issue of enforcement and attaching “teeth” to the policy is a difficult conundrum. Advocates’ instinct is often to require a penalty for noncompliance; however, this is a losing battle that will cause problems within schools. Typically, local administrators (i.e., principals) have control over the school building, including vending, school stores, and fundraisers. Policies that penalize the food service department for noncompliance are misdirected, as the department may have no control over the administration of vending, fundraising, and school stores. A more realistic way of ensuring comprehensive implementation of policies is to promote compliance. Here we examine three methods of promoting compliance: local oversight, coordinated school health, and financial incentives.

Compliance via Local Oversight: Arkansas, California, Massachusetts

Oversight by a school or school district’s governing board is a common, yet flawed, method of ensuring compliance to state competitive food standards. Educators, cafeteria personnel, and school administrators are typically overburdened with existing work tasks, leaving them unable to give full attention to compliance with such laws. Coupled with concerns about revenue loss from changing existing competitive food and beverage offerings, they may lack the motivation to enforce compliance.

Arkansas: In 2003, Arkansas legislators passed Act 1220, which aimed to address childhood obesity via a multifaceted approach targeting the school environment. One component was the establishment of guidelines to prohibit or discourage the sale of unhealthy foods and beverages in schools. A study comparing baseline and year-five results found a significant increase in the number of school districts with competitive food policies; however, compliance with policies was mixed.¹⁴ Students in about one quarter of all middle schools and over one-third of all high schools maintained access to vending machines, even though access was banned according to state regulation. Similar results were reported regarding the content of vending machines—although there were reductions in the availability of less-healthy snacks, the reductions in elementary and high schools were not statistically significant. Mixed results on compliance may have affected the law’s intended outcomes. A study of the effect of Act 1220 on student BMI showed no significant change from year one (20.9% overweight and 17.2% at risk for overweight) to year four (20.6% overweight and 17.2% at risk for overweight).¹⁵

California: In 2005, California passed Senate Bill 12, which set nutrient standards for all foods and beverages sold on public school campuses from elementary through high school. Schools were required to comply with the law by July 2007. Compliance is monitored through the California Coordinated Review Effort (CRE) process, which occurs at least once every five years, and through each school district’s governing board on an annual basis. A 2009 sample analysis of California high schools found that the majority of schools (71%) were adhering to the required beverage standards; however, none of the schools selling competitive foods were 100 percent adherent to the food standards, bringing into question the effectiveness of this method of compliance monitoring.¹⁶ However, even with questionable compliance to the law, student outcomes were favorable. A study of data from California high school students in 2010 found that students consumed lower quantities of fat, sugar, and calories in school than students in states with no competitive food nutrition standards.¹⁷

Massachusetts: In July 2010, the Massachusetts State Legislature passed HB 4459 and SB 2322, which required the State Department of Public Health, in coordination with the State Department of Elementary and Secondary Education, to develop evidence-based nutrition standards for Massachusetts public schools.

The law requires standards to follow scientific guidelines that encourage consumption of water, low- and nonfat milk, and juice; reduced fat and sugar in snacks; and increased consumption of fresh fruits and vegetables. Since the law was passed, standards were developed for all foods and beverages sold or provided from 30 minutes before school starts to 30 minutes after the school day ends. Massachusetts' standards, which represent some of the strongest standards in the nation, took effect in August 2012. The law established a Commission on Childhood Obesity to develop a coordinated statewide plan to implement the guidelines; however, compliance will be monitored with local oversight by school district administration and wellness committees.

Compliance via Coordinated School Health: Tennessee

Another approach to ensuring compliance is the Coordinated School Health (CSH) approach. CSH is a strategy recommended by the Centers for Disease Control and Prevention (CDC) to improve student health and learning in schools. It comprises eight interrelated components: health education; physical education; health services; nutrition service; counseling, psychological, and social services; healthy and safe school environment; health promotion for staff; and family/community involvement. When aptly implemented, the approach creates a systems change in schools by “improving students’ health and their capacity to learn through personal responsibility, and the support of families, communities and school.”¹⁸

In 2006, the Tennessee General Assembly passed Public Chapter 1001, the Coordinated School Health Expansion and Physical Activity Law, which required all public school systems (also known as Local Education Agencies) to implement the Coordinated School Health Model and provided \$15 million in funding to expand the model statewide by the 2007–2008 school year. As part of this mandate, school systems are required to match their Coordinated School Health grant amount based on their classroom basic education program (BEP) rate (a funding formula used in Tennessee to determine the amount of state dollars provided to a local school system). Another key component of the model is the establishment of school system-level infrastructures such as School Health Advisory Councils and Staff Coordinating Councils that focus on the health and wellness of all students. In addition, CSH coordinators are funded within each public school system to provide leadership and help develop school health policy, partnerships, and activities that advance student health and, in theory, improve student academic outcomes.

Prior to the passage of Public Chapter 1001, in 2004 the Tennessee General Assembly passed T.C.A. § 49-6-2307, which commissioned the State Board of Education to develop nutritional standards for competitive foods and beverages sold in all K-8 schools. The result of this legislation was the development of the “Minimum Nutritional Standards for Individual Items Sold or Offered for Sale to Pupils in Grades Pre-K-8,” which was completed in 2005 and then updated in 2008. What makes Tennessee stand out, however, is the breadth of the implementation of nutrition standards for competitive foods, in no small part due to the presence of CSH coordinators within each public school system. Reports show that as of the 2010–2011 school year, 96 percent of K-8 school systems reported being in compliance with state competitive food standards.¹⁹

Compliance via Financial Incentive: Connecticut

Another approach to ensuring compliance is to offer financial incentives to districts. Section 10-215e of the Connecticut General Statutes required the Connecticut State Department of Education (CSDE) to publish a set of nutrition standards by August 1, 2006. Standards were developed in July 2006, with input from a state nutrition standards committee. The statute also requires the CSDE to reconvene the state nutrition standards committee each year to evaluate and revise the Connecticut Nutrition Standards as needed, based on changes in nutrition science, national health recommendations, and the availability of new food items.

Revised nutrition standards are published by January 1 of each year, to be effective for the next school year (July 1 through June 30). The standards apply to all venues of food sales on school premises at all times—including, but not limited to, school stores, vending machines, school cafeterias, and any fundraising activities on school premises.

To incentivize school districts to implement state nutrition standards for competitive foods, the CSDE developed Healthy Food Certification (HFC). Districts that opt to implement HFC receive an additional 10 cents per lunch, based on the total number of reimbursable lunches (paid, free, and reduced) served in the district in the prior school year. As of the 2011–2012 school year, 71 percent of school districts (133 out of 188 districts) in Connecticut opted to participate, demonstrating the power of this incentive model to garner compliance with state standards.²⁰

Competitive Foods in Schools: Local Efforts

Although school districts are mandated to have a local school wellness policy with goals around nutrition, no data exists as to how many of the approximately 15,000 school districts in the United States have adopted nutrition standards for snack foods and beverages. As with state standards, policies within compliant districts vary greatly in their strength and breadth. A 2012 study found that nationwide, fewer than 5 percent of school districts had policies for competitive foods that met or exceeded all of the 2010 Dietary Guidelines for Americans recommendations examined (e.g., restrictions on sugars, fats, trans fats, and sodium in foods and restrictions on regular soda, other sugar-sweetened beverages, and fat content of milk).²¹ District-level policies, particularly those accompanied by multicomponent school-based interventions, can be effective in preventing obesity among children.²² However, widespread district-by-district adoption of policies is arduous, and may be better supported by the presence of a strong state policy framework.

Local School Wellness Policies

The Child Nutrition and WIC Reauthorization Act of 2004 required every local education agency (LEA) participating in the National School Lunch Program to develop a local wellness policy (LWP) for schools. These policies were required to “include nutrition guidelines selected by the local educational agency for all foods available on each school campus under the local educational agency during the school day with the objectives of promoting student health and reducing childhood obesity.”²³

A 2010 review from Bridging the Gap found that “district wellness policy provisions generally have improved during the three years since the federal mandate went into effect, yet they remained weak overall and many did not align with national recommendations for nutrition or physical activity.”²⁴ The report found that many school districts’ competitive food guidelines applied to either foods or beverages but not both, or applied to vending machines and à la carte cafeteria lines but not to other school locations that sold competitive foods. Moreover, “no district met all of the Institute of Medicine standards for competitive products, and guidelines restricting sugar-sweetened beverages and sodium content of snacks were especially weak.”

Recognizing the need to improve compliance with LWPs, the Healthy, Hunger-Free Kids Act of 2010 strengthens the requirements for local wellness policies, including adding rules for public input, transparency, and implementation. Most notably, LEAs will now be required to measure and make available to the public information about LWP implementation and compliance and are required to designate an LEA or school official to ensure that each school complies with the LWP. The USDA Food and Nutrition Service will release a proposed rule in fall 2012, and a final rule in fall 2013, that will define

key terms and provide regulations and guidance for LEAs, school food authorities, and state agencies to implement the new local wellness policy provisions.

Alliance for a Healthier Generation Healthy Schools Program

Created in 2006, the Alliance for a Healthier Generation's Healthy Schools Program (HSP) is a free program for schools that provides a framework, resources, and tools for creating healthier school environments. The HSP consists of a six-step change process: 1) convening of a school wellness council; 2) completion of an HSP Inventory assessment; 3) development of local priorities and action planning; 4) technical resource development; 5) implementation; and 6) monitoring progress through updates to the HSP Inventory. Currently, over 14,000 schools participate in the Healthy Schools Program. However, to date only 173 schools have achieved the Silver level of recognition from the HSP, which is awarded when a school is compliant with both the Alliance School Beverage Guidelines and the Alliance Competitive Foods Guidelines for items sold outside of school meal programs. An additional five schools have achieved Gold level, which requires schools' to achieve Silver level as well as to comply with restrictions on the sale of sports drinks, food marketing, and nutritional requirements for à la carte entrée items and foods and beverages sold in staff lounges and at school-sponsored functions.

An evaluation of the Healthy Schools Program, published in March 2012, found that the more schools accessed and participated in training and technical assistance, the more progress they made in implementing policies and programs that support healthier school environments.²⁵ In addition, researchers noted the potential for interplay between state policies and technical assistance provided by the Healthy Schools Program, whereby the HSP is a resource for schools to implement state competitive food policies. This speaks to HSP's potential as a complementary asset to state policy work.²⁶

Lessons Learned from Federal, State, and Local Efforts

The sections above illustrate the need to expand the evidence base around not just the positive health, academic, and behavior outcomes of changing the school competitive food environment, but also the strengths and weaknesses within each level of policy and methods of compliance monitoring. Based on these examples, it is clear that to date the most successful models for widespread compliance utilize financial incentives, intensive technical assistance, or a combination of the two.

The list below summarizes specific steps to take to be successful in improving the school competitive food environment on a national scale.

STEPS FOR SUCCESS

Step #1: Build the research base.

- Research questions include:
 - Do state/local nutrition standards for competitive foods prevent/reduce obesity?
 - Competitive foods' impact on test scores
 - Competitive foods' impact on student behavior
 - Competitive foods' impact on student health
 - Competitive foods' impact on participation in school meals programs
 - Healthy competitive foods' potential to increase school revenue
 - Capacity of competitive food nutrition standards to facilitate improved parent-school relationships (i.e., can policies garner positive PR for schools to make them look good to parents?)
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Step #2: Secure sufficient financial resources for local efforts to boost policy compliance.

- Implementation strategies include:
 - Technical assistance for local school districts, such as Coordinated School Health, Alliance for a Healthier Generation Healthy Schools Program, other efforts
 - Financial incentives for school districts to implement nutrition standards

Step #3: Develop messaging strategies tailored to the education community.

- Stress short-term rewards associated with policy compliance, be compelling and concise, and include a combination of emotional and rational messages.
- Tailor messaging to different school groups:
 - **Administrators:** Focus on helping boost student achievement and increase revenue
 - **Educators:** Focus on making educators' job easier, reducing stress, and increasing school revenue
- Explore the use of imagery and pop culture references to disseminate messaging.

Step #4: Coordinate messaging with traditional and unconventional partners to build support.

- Unconventional partners include:
 - School employee unions
 - School administrators
 - School food service
 - Anti-hunger groups
 - Sports teams/athletes
 - Farm to School
 - Chefs
- Traditional partners include:
 - State health associations (cancer diabetes, heart)
 - State medical associations (nurses, doctors, dietitians, dentists, health officers)
 - State public health and food policy advocates
 - State Parent Teacher Association (PTA)
 - Student groups

Step #5: Explore the use of measurement to bolster policy compliance.

- Explore tying policy compliance into existing school evaluations, instead of burdening schools with yet another evaluation system.
 - Add compliance with competitive food standards to data collection for school district annual report cards.
 - As required by the No Child Left Behind Act of 2001, each state has developed a single statewide accountability system for all public schools in the state. Annual school and district report cards already provide information about test performance, teacher qualifications, student safety, and parent involvement.
 - Incorporate compliance with competitive food standards to USDA Coordinated

Review Effort (CRE).

- The CRE occurs at least once every five years and is done to ensure compliance with federal school meal program requirements.
 - Allow participation in school wellness committees to be recognized within state teacher evaluation systems such as goals-based evaluation (i.e., where teacher participation can help fulfill professional development requirements).
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Conclusion and Next Steps

The past four decades have taught advocates a great deal about strategies to create healthy school nutrition environments for students. Yet advocates have yet to fully make their case to those outside the school food advocacy world. We need a stronger evidence base around the connection between “junk” competitive foods in schools and childhood obesity, lack of academic success, and poor student behavior. We also need to directly educate school employees by framing communications and messaging specifically for them. Finally, we need to further explore the concept of measurement as a method of bolstering compliance with competitive foods policies. As one breakout-group participant put it, “What gets measured gets done.” However, given the amount of measurement that is already required of school systems, advocates need to think creatively about how to tie metrics into existing school evaluations, such as the school report card, coordinated review effort, and state teacher evaluation systems.

This report was written by Lisa Sharma Creighton, Senior Program Coordinator, NEA Health Information Network. Views expressed are those of the author and not NEA Health Information Network.

The National Policy & Legal Analysis Network to Prevent Childhood Obesity (NPLAN) is a project of ChangeLab Solutions. ChangeLab Solutions is a nonprofit organization that provides legal information on matters relating to public health. The legal information in this document does not constitute legal advice or legal representation. For legal advice, readers should consult a lawyer in their state.

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⁸ When initially introduced, CA Senate Bill 19 (a statewide pilot program to determine the financial impact on schools that implement rigorous nutrition standards for competitive foods) was opposed by various California education groups, including school administrators, directors of activities, school boards, and school food services. Four years later, the CA School Boards

Association and the CA Food Service Association went on to co-sponsor CA Senate Bill 12, which established rigorous nutrition standards for competitive foods.

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Promoting Safe Routes to School Programs in Low-Income Communities and Communities of Color: Challenges and Opportunities

Report from Focus Group at NPLAN Symposium

“How do we plant the seeds that get people to ask ‘What is available in my community and why?’”
Question posed by focus group participant.

Introduction

Across the country, Safe Routes to School (SRTS) policies and programs are making walking and bicycling to school a safe way for children to be physically active. But communities of color and low-income communities are not at the center of this movement. How can we make SRTS relevant to these communities? And how can the SRTS movement become a meaningful advocate for equity?

A group of SRTS and equity advocates and a school integration advocate came together at the annual symposium of the National Policy & Legal Analysis Network to Prevent Childhood Obesity (NPLAN) to discuss this topic. This report summarizes that discussion.

The major issues that emerged as participants discussed SRTS and equity are:

1. What is the relevance and applicability of SRTS to neighborhoods of color?
2. How can we ensure that SRTS funds are distributed equitably?
3. How can SRTS become part of a larger movement for equity?

1. Bigger Fish to Fry: The Relevance of SRTS in Low-Income Communities and Communities of Color

SRTS can play an important role in strengthening a sense of community, empowering community members, and promoting more active lifestyles by creating better infrastructure for walking and biking. But, as one participant said, “Sometimes the issues of walking and biking don’t seem as relevant in particular communities.” That is, parents and caretakers in low-income communities and communities of color often “have bigger fish to fry than getting their kids to walk to school.”

Every community is motivated to participate in SRTS for different reasons. But racial and class differences can make the work more complex. Ensuring the success of programs in low-income communities and communities of color may require a different approach.

Framing: Thinking Bigger than Just Walking and Biking

Part of the challenge lies in finding an effective way to frame the issues and provide a positive vision that resonates with individuals and their communities. In the process of establishing trust and credibility, advocates will begin to identify the specific concerns that must be addressed in order to successfully implement SRTS in a given community.

For low-income communities, framing should emphasize the community-building aspect of SRTS, such as its potential to increase levels of parental involvement and strengthen a community's sense of empowerment, or reduce crime and increase perceptions of safety. As one participant said, many young people in these communities "are already walking; let's make sure that they are safe." At the same time, getting young people to walk can be a challenge when they live in neighborhoods with high crime rates and few sidewalks. Communities may have concerns about physical safety, the presence of abandoned housing, or environmental hazards. Many "communities are struggling to take back their neighborhoods." Structured appropriately, SRTS programs can help them in that work.

Listening and Connecting

Before implementing a SRTS program, advocates need to "do more listening than talking," participants noted. "Slow down and listen, instead of pushing an agenda," one offered. Asking questions such as "What resources exist?" and "What are the core issues here?" will lead to better solutions. Identifying and involving key community stakeholders – "making sure everyone is in the room" – early on in the SRTS process was seen as essential. Along those same lines, tapping into preexisting grassroots efforts and networks (which may not be explicitly focused on obesity and may not identify with SRTS) ensures that SRTS does not overlook partnership opportunities; it also demonstrates respect for what communities have built. Last, in many communities, it may be necessary to implement programs incrementally, first listening to the community's concerns and responding to them before launching an SRTS initiative.

As one participant noted, "There is no such thing as a blanket approach" to SRTS. Another reminded the group that "a lot of our middle-class mind-sets are not appropriate." Thus, it is important that SRTS advocates have the appropriate skills and tools—and greater levels of cultural competency and sensitivity—to translate the broader concept of equity into programs and policies that achieve it.

Challenges and Actions

Some of the challenges to implementing SRTS programs in low-income communities and communities of color include:

- Finding and keeping volunteers in lower-income communities (even with funding), in contrast to very strong volunteerism in middle-income communities. Parent and community leadership is vital to sustain both local SRTS programs and the communities themselves.
- Safety concerns that go beyond traffic/neighborhood infrastructure, such as violence and/or perceptions of violence.
- Difficulty engaging stakeholders in meaningful ways.
- Getting past being seen as an "outsider" – lacking credibility in the community.
- Institutionalization and/or long-term sustainability of SRTS programs.
- Lack of safe bike-riding skills among some children.
- Concerns about emphasizing law enforcement involvement in SRTS due to community members' immigration status.

To respond to these challenges, SRTS advocates must invest time in building relationships to establish trust and credibility; find allies and partner with public housing officials, community leaders, students, and political leadership; be creative and flexible; and take time to map out and understand the community context (e.g., identify specific places where it may not be safe to walk or bike, such as environmental hazards, no sidewalks, where there is gang activity, etc.).

School and Neighborhood Segregation

Segregation in neighborhoods and schools is an additional challenge to SRTS implementation. Policy interventions, including those designed to address obesity, must be carefully considered in light of the fact that access to opportunity is strongly influenced by physical location. A strong body of research demonstrates that racial and economic segregation in neighborhoods and schools is harmful to learning, health, and overall child development. SRTS advocates should be sure to situate walking/biking programs within a historical, political, and social context. The following suggestions were offered on this point:

- Learn and acknowledge the history: Research the community's history of racial discrimination and desegregation and look for evidence of residual inequality.
- Understand the research on integration: There are important, education-related reasons to deconcentrate poverty and reduce racial isolation in schools. These matter to children's well-being and educational success and opportunities, and ultimately also to children's long-term health.
- Generate new knowledge and research: We need to know more about the short- and long-term health outcomes of SRTS *and* integration. If the ultimate goal of SRTS is to increase physical activity, advocates should be aware of and highlight policies and conditions that create and sustain disparate access to physical activity opportunities between schools and between districts (e.g., disparate access to physical education during the school day, recess policies, access to playgrounds, and/or access to after-school sports).
- Be more explicit about the primary objective(s) of SRTS programs: Articulate the main goals of SRTS and then be flexible and creative in program design in order to support students who may not attend nearby schools.
- Support diversity and equity: Openly demonstrate support for increased diversity in schools and neighborhoods, for example, by working with school integration and fair housing advocates.

Lessons and Approaches

An important piece of advice offered during this discussion was to set reachable goals. "Sometimes, you can't make the whole neighborhood safe," one participant explained, "but you can make a specific route safe for two hours while kids are traveling home from school."

Advocates have successfully created partnerships and implemented SRTS in a number of low-income communities and communities of color. These programs take many forms. A number of "promising practices" emerged from these discussions:

- Atlanta, GA – The Fatherhood Project, which focused on parent involvement and used SRTS to achieve that goal
- Chicago, IL – Formation of community watch program to address safety and perceptions of safety
- Detroit, MI – Incremental development of SRTS, beginning with community cleanup, mapping dangerous areas, and a community walk-to-school day

These programs demonstrate how to successfully create deeper, more authentic relationships with communities and how to develop SRTS programs that serve multiple purposes and meet the needs of host communities. Many of them succeeded in "getting more eyes on the street" by coupling SRTS with neighborhood watch-type programs. All members of the community, not just the students biking and walking to school, benefited.

Many of the problems that SRTS programs address, particularly in low-income communities, are structural. It is, therefore, particularly important to couple SRTS programs with policies that establish support structures that institutionalize programs for the long term. Affirmative policies promoting SRTS programs can serve as an anchor as they take root in communities.

2. Equitable Distribution of SRTS Funds: Using Grant Making to Strengthen the Equity Focus of SRTS

A strong commitment to equity in grant making could influence the quality and viability of SRTS programs in low-income communities and communities of color. Participants discussed existing resources that may be used to promote equity. At the same time, because many communities currently lack the capacity, established leadership, and vision required to successfully apply for and implement SRTS grants, the SRTS movement as a whole needs to establish a different structure of grant making—one that makes resource-intensive, longer-term grants possible.

a. Where there is basic readiness, utilize existing resources, such as planning grants

SRTS funding can be used for planning assistance, which can help fund consultants who have experience and established relationships in certain communities. Examples include a program in Arizona that works with Native American communities, and another in Atlanta that hired a consultant to act as a program officer. The consultant set up living room chats with residents and used information learned in these discussions to write and submit a SRTS application. When the grant was awarded, the consultant continued to provide technical assistance.

However, participants acknowledged the challenges of ensuring that SRTS planning grants are distributed equitably, especially given the amount of resources required to design and successfully implement SRTS programs in high-needs contexts, even when there is basic readiness.

b. Where there is not readiness, build capacity (requires a new grant-making thread)

A different structure of grant making is necessary, one that makes resource-intensive, longer-term grant making possible (e.g., trust-building, funding for volunteers, recognizing a lack of community capacity to secure private donations, etc.). Ideas that emerged during this discussion included:

- Instead of accepting grants by “open call,” Departments of Transportation could put out RFPs in communities with identified need.
- Grant applications could make larger values more explicit (including the value of physical activity and obesity reduction, as well as non-obesity-related outcomes, e.g., the program’s ability to bring neighborhoods together to solve other issues in the community, community-building outcomes, leadership development, parent engagement, etc.). This would enable communities to articulate their goals in a way that felt true to their community while fitting within the grant objectives.
- More targeted approaches could lead to increased consistency in programs, making them easier to evaluate. (Evaluations should capture a program’s effectiveness on measures such as community-building and perceptions of neighborhood safety; criteria could include a civil rights/equity perspective, potentially by partnering with civil rights organizations and/or university-based research institutes, which may have their own funding.)
- Collaboration and respect for local organizations could be built into the application process by asking applicants to demonstrate a relationship/partnership with a community organization. (This

could ultimately help local SRTS programs develop the capacity to be self-sufficient over the long term.)

On the topic of building capacity, participants offered the following ideas:

- Instead of implementing the programs ourselves, bring them to the attention of community leaders.
 - Identify and participate in statewide conferences to raise awareness and find local partners.
 - Help community-based groups develop messaging. In doing this, recognize the importance of firsthand personal narratives. Let parents, community members, etc. who have benefited from SRTS programs share their stories.
 - Provide information about techniques and available funding opportunities.
 - Consider giving grants to local organizations that are already working in high-needs neighborhoods and already have relationships with communities.
- Use existing (and forthcoming) resources and structures with a mind toward equity, including:
 - Provide mini grants (\$500–\$1,500) to churches, small programs, etc. to conduct evaluations of health barriers in community.
 - Learn from the needs assessment currently under way by the California Department of Public Health. They are conducting a needs assessment of SRTS programs in low-income and underserved communities that will identify barriers to and opportunities for SRTS in the state, which should be completed in 2013.

3. Thinking Bigger: Can SRTS Become Part of a Larger Movement?

A recurring theme of the symposium was the desire of the anti-obesity movement to connect to a larger movement for equity, justice, and social change, and the SRTS session echoed this as well.

By framing SRTS to emphasize the variety of benefits that can flow from well-designed and well-implemented programs, rather than focusing solely on increasing everyday opportunities for physical activity, SRTS's relevance to broader movements becomes more apparent. In order to get there, though, SRTS program leaders must first create an infrastructure of support that addresses the common challenges of implementing SRTS programs in low-income communities and communities of color. In particular, equity and cultural competence must be woven into SRTS policies and practices, particularly with regard to funding and staff development. Participants also cited specific campaigns as being particularly effective and potentially helpful in this work, such as the “livable communities” campaign by Thriving Communities and the anti-tobacco Truth Campaign.

Both SRTS and anti-obesity efforts are part of a larger movement, and SRTS should be part of creating an “affirmative vision” for such a movement. There are larger root causes for numerous ills; as one participant noted, “obesity is a symptom of a larger social problem.” Poor health outcomes and inequity are related to the structure of our laws and society. One participant noted that there is a need to be “less self-centered” on biking and walking advocacy and to focus more broadly on equity issues in order to develop a shared vision. In the same vein, another participant stated that SRTS advocates should “stop pushing a specific agenda.” She felt that by listening more, advocates could help address larger issues that communities are struggling with, including changes in our social infrastructure that have led to decreased capacity to make healthy decisions, an overreliance on cars, and the failure to acknowledge poverty and create effective infrastructure to address it.

Before the civil rights movement had its own identity and name, there were many smaller movements focusing on related issues, such as school integration, transportation equity, employment discrimination, and so on. Eventually, these smaller movements coalesced into a larger movement. There is tremendous value in connecting smaller movements such as SRTS, child obesity, affordable healthy foods, and environmentalism with other efforts, including criminal justice, fair housing, and educational equity, so that they might similarly coalesce into a larger movement focused on equity and social justice, sustainability, and health.

Participants also generated ideas about opportunities for collaboration and engaging new audiences and stakeholders. Some highlights of the discussion included:

- “It’s not just about walking”: Combining walking, biking, carpooling, and transit advocacy can broaden support. One participant described “a certain hostility about busing amongst SRTS advocates” and stated that creating stronger partnerships between schools and public transportation would greatly benefit the public.
- Improving the effectiveness of the discussion of the issues: One participant stressed the importance of talking about public values and the values of SRTS. He felt that, with regard to equity, SRTS was at times “saying one thing, but doing another.” Participants suggested framing with a “rights” mentality and drew parallels to the bike movement (which participants felt effectively framed biking as “a community struggle”).
- How to reframe obesity as an individual problem rather than a structural problem: “When we take it to the public,” one participant observed, “it is still regarded as a matter of personal choice.” She wondered what a more structural framing approach might look like. This comment led participants to ask, “How do we plant the seeds that get people to ask ‘What is available in my community and why?’” and to recognize that lack of personal choice is at the heart of it. This point applies across the board to much of the work done by partners in the childhood-obesity prevention movement. Participants recognized the importance of engaging young people in this work.

Next Steps

Participants identified the following key actions and strategic directions:

Local communities: In local communities of color, the SRTS movement needs to:

- Tap into existing organizations and coalitions and move away from top-down approaches that make it difficult to work in partnership with grassroots community leaders.
- Listen to community needs and frame the benefits and goals of SRTS programs to address those issues.
- Be flexible and creative in addressing specific obstacles that may arise, from low volunteerism to the need to develop basic bicycling skills.
- Effectively and thoughtfully navigate around potentially conflicting and/or complex education policies (e.g., open enrollment, school closings, busing, magnet schools, desegregation).
- Collect data on which approaches are more and less effective in increasing physical activity among low-income communities and communities of color.
- Continue to highlight promising practices and celebrate successes, even incremental ones.

Funding: As far as funding, the SRTS movement should:

- Support and encourage new funding models and equity in funding.

- Provide extra support in low-income communities and communities of color, particularly in the realm of grant writing, where the capacity to successfully apply for and implement grants might not yet exist.
- Where there is readiness, look for grants for planning assistance and fund consultants who are expert in specific communities.
- Where there is not readiness, build capacity:
 - Encourage funders to create longer-term funding to invest in communities that are building capacity.
 - Ensure that relationships with local organizations are built into grants.
 - Encourage mini grants to churches and small programs to evaluate health or take other actions as a first step.
 - Help local groups develop messaging and first-person stories.

National work: To make its commitment to low-income communities and communities of color real, the national SRTS community needs to:

- Help SRTS and childhood obesity become key constituents in a national movement for increased equity and safe, healthy, and vibrant communities.
- Build deeper relationships with more different types of stakeholders, including people working in fields such as education policy, fair housing, urban planning, criminal justice, and transportation equity, as well as public housing authorities, transportation providers, educational reform advocates and practitioners, youth groups and organizations, and more.
- Create resources to help increase cultural competence of SRTS leaders and continue to identify best practices for working in low-income communities and communities of color.
- Work toward new funding models and equitable funding of SRTS initiatives in low-income communities and communities of color.

This report was written by Gina Chirichigno, Co-Creator and Co-Director, One Nation Indivisible, and Sara Zimmerman, Senior Staff Attorney, ChangeLab Solutions. August 2012.



Sugar-Sweetened Beverage Taxes: What Do We Need To Win? Pricing Strategies Breakout Session Report, NPLAN Symposium, April 2012

Introduction

The National Policy & Legal Analysis Network to Prevent Childhood Obesity (NPLAN), a program of ChangeLab Solutions, held a planning symposium in San Francisco, CA on April 26-27, 2012. One of the breakout sessions addressed pricing strategies for sugar-sweetened beverages (SSBs), with a focus on taxes. The purpose of such taxes is to raise revenue to fund obesity prevention initiatives and encourage a population shift toward healthier diets. The goals of the session were to discuss the challenges faced by advocates for sugar-sweetened beverage (SSB) taxes; to identify research, advocacy and other needs for tax legislation to be successful in 2013; and to gauge key advocates' and policy experts' sense of the viability of other pricing strategies for SSBs. This paper summarizes the breakout session discussion. It is meant to inform the pricing strategy recommendations put forth by the Robert Wood Johnson Foundation and to serve as a next-steps guide for public health coalitions advocating SSB taxes.

Sugar-Sweetened Beverage Excise Taxes: Brief Background

Legislation 2009-present

In the 2009-10 legislative session, seventeen states and three cities (Baltimore, Washington DC, and Philadelphia) filed legislation to impose taxes on SSBs. Most were for excise (vs. sales) taxes to be levied at the manufacturer/bottler and/or distributor level, with the expectation that the cost would be passed on to the retailer, thereby increasing the on-shelf price of the product. Most of the bills also included language which would earmark the revenue for obesity prevention or other health-related programs. In 2011, fifteen states filed bills, and in 2012, eight states filed them. On the local level in 2012, Richmond, California's city council voted to put a referendum on the November ballot to impose a penny per-ounce business license fee, and Chicago's City Council held a hearing to consider a sales tax on SSBs. As of this date none of the bills has passed, although in 2010 Washington State passed a temporary tax on soda that was repealed by ballot initiative, and Colorado passed a 2.9% sales tax on SSBs. Nevertheless, there continues to be serious debate at the state level on taxes, given the desperate need for funding and concerns about health and rising health care costs.

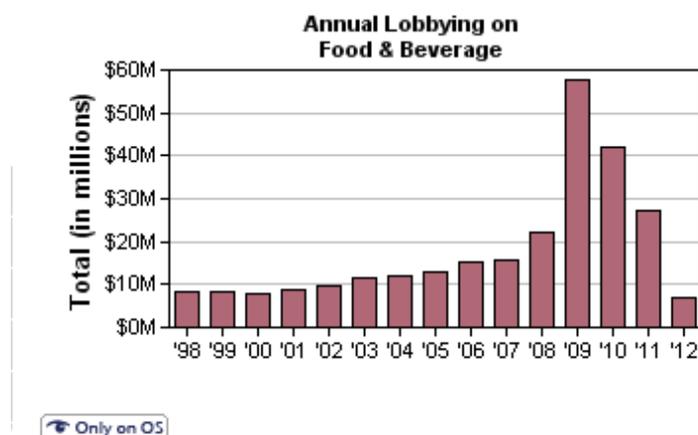
The Beverage Industry's Response

The beverage industry fights tax proposals fiercely in a variety of ways. Its most powerful tactic is lobbying—it continues to spend significant amounts on local, state and federal levels, to dissuade legislators from enacting SSB taxes (see graph below for example) and to support legislators' re-election campaigns. In the Washington State case noted above, the beverage industry was the key driver of the repeal, pouring more than \$16 million into the anti-tax campaign. Industry lobbyists and beverage executives make appearances not only at state-level hearings on tax legislation, but even at small meetings of city council subcommittees.

In addition:

- The American Beverage Association (ABA) has orchestrated the appearance of union members at public hearings, who carry signs claiming that a tax will be a “job-killer.”¹
- Four of the major beverage companies (Coke, Pepsi, Dr. Pepper, and Sunny Delight) have joined forces to deliver the message on TV and in major newspapers that they are doing their part to combat the obesity epidemic by producing smaller cans and offering more choices, including more lower-calorie options.² They continue to relentlessly market full-sugar drinks to children.³
- The industry has created “Americans Against Food Taxes”⁴ which claims to be a “coalition of concerned citizens” but whose membership includes all the major beverage companies (significantly, their domain extension is “.com” rather than “.org”). Through its website, and ads created for it, it invokes “nanny state” rhetoric in an effort to influence people’s opinions against taxes.
- In one of their more cynical moves, the beverage companies are funding the same projects for which the taxes would be earmarked, such as refurbishing local park facilities. Notably, they almost exclusively fund efforts to promote physical activity, which supports their assertion that the obesity problem would be solved if Americans would simply exercise more.

Food & Beverage: Lobbying, 2011



www.opensecrets.org, accessed June 15, 2012

N.B. The peak in 2009 spending corresponds with a brief consideration by Congress to partially fund Health Care Reform with a tax on SSBs.

The Movement to Reduce SSB Consumption: Accomplishments So Far

In the last several years, public health advocates have made tremendous strides in bringing the issue of sugary drink consumption to the forefront of the obesity prevention movement, and into the consciousness of average Americans. Much of the attention has been on taxes as an effective public health measure to raise obesity prevention revenue and reduce consumption, but other initiatives have been introduced as well. (A list can be found on the Rudd Center’s [SSB website](#).) Regardless of the initiative being promoted, the issue has galvanized the public health community in a way reminiscent of the anti-tobacco movement, and evidence of our success in associating SSBs with negative health effects is evinced in the

aggressiveness of the beverage industry’s response to the tax proposals. (See box below for industry responses borrowed from Big Tobacco’s “playbook.”) Policy and advocacy organizations and leaders across the country have built good working relationships based on the issue, and both our independent and collaborative work has proven to be quite fruitful. Public health researchers and advocates continue to build on an already-solid base of resources: scientific papers on the health effects of consumption, model policies for states and localities, educational programs, and other resources. The major organizations devoting resources to the issue include:

- California Center for Public Health Advocacy
- Center for Science in the Public Interest
- ChangeLab Solutions/NPLAN
- University of Illinois, Chicago, Bridging the Gap
- Yale Rudd Center for Food Policy and Obesity

Beverage Industry Responses Borrowed from “Big Tobacco” Playbook

- Dispute the science as biased, plant doubt by calling it “junk science”
- Pay scientists to do negative studies
- Evoke “nanny state” arguments
- Launch public relations efforts arguing that the industry
 - promotes moderation, not abuse of its products
 - is concerned about the health of its customers
 - simply provides choice
- Blame irresponsible individuals for their own overweight/obesity
- Fund civic activities as an indication of social corporate responsibility
- Create front groups (e.g. “Americans Against Food Taxes,” the “Community Coalition Against Beverage Taxes” in Richmond, CA)
- Introduce “safer” products (artificially sweetened, smaller cans) while continuing to heavily market the unhealthy products
- Use celebrities to sell products

In addition, bold and creative proposals and policies have come from political leaders and public health directors and advocates across the country, including:

- Boston’s Mayor Menino issued an executive order to prohibit the purchase of SSBs for sale on any government property; the Boston Public Health Commission is working with a consortium of hospitals on healthy beverage initiatives;
- New York City’s Mayor Bloomberg proposed that the Board of Health prohibit the sale of single-serving sizes greater than 16 ounces in all venues regulated by the Board; a proposal was made to the USDA to allow NYC to study the effect of prohibiting the purchase of SSBs using SNAP benefits (it was rejected);
- Public health educational campaigns in cities across the country are urging people to “rethink your drink”;
- Plans are underway to negotiate with leading supermarket chains to encourage customers to purchase more healthful drinks;
- A website devoted entirely to sugary drink consumption and advocacy resources is up and running (www.kickthecan.org); and

- Pediatricians in Boston are writing “prescriptions” for patients to stop drinking sugary drinks.

A prescription form with the following fields: NAME _____ AGE _____, ADDRESS _____ DATE _____, Rx, Units _____, Refill NR 1 2 3 4 5, Void after _____, ___ Do Not Substitute, Signature _____, and FX_CA_H in the bottom right corner. A red prohibition sign (a circle with a diagonal slash) is overlaid on two bottles of sugary drinks (one yellow, one brown).

The Current Challenges for SSB Tax Advocates

Advocates face a variety of challenges if we are to be successful in passing SSB tax legislation. An overarching issue is that we have yet to make a compelling case for the taxes to the general public and the larger public health community. The following is a synopsis of some more specific challenges and unanswered questions advocates face as we move forward.

Legislation

The question of where to focus a tax—on a state or local level, or both—needs further discussion. There is a compelling argument to be made to attempt to pass a tax at either level: the biggest hurdle will be to pass a tax *anywhere*; others will fall in line after that. At the state and local levels, challenges include those that are discussed below. In addition, at the local level, the challenges include complicated technical issues that may be particular to a city’s (or its state’s) regulatory process, and so the type of tax passed in one city may be applicable only to that city, and may not advance the cause in others. For example, localities are preempted in many states from imposing excise taxes, and must turn instead to business license fees or other regulatory measures to target SSBs and raise revenue. Cities may also run into problems with the logistics of implementing taxes at the retailer level.

Regardless of the actual feasibility of enacting a local tax, when the possibility is raised, it gets both local and national media attention. Advocates therefore may want to continue to encourage these local efforts not only because we will eventually be successful, but also because of the opportunities they afford both local and national public health leaders to publicly reinforce the message that sugary drink consumption is a key contributor to the obesity epidemic.

Earmarking

In order to focus on the intended target of these taxes—overweight and obesity—earmarking the revenue for obesity prevention is a necessity. There is always the risk, however, that if a tax is passed, the revenue would be used to fill budget deficits, especially in the current economic climate in most states. If earmarking is a possibility, how do advocates ensure that the money will augment, rather than supplant existing obesity prevention (or health promotion or built environment improvement) dollars in state

budgets? Polling results have shown fairly consistently that the public would support taxes if they were earmarked for childhood obesity prevention. More such polls are needed to gauge support for earmarking and to identify the specific revenue uses most supported by voters; more discussion of the viability of earmarking and how advocates can influence the process is also necessary.

The tax: what size and form?

Economic modeling has shown that a ten percent increase in the cost of SSBs would result in an 8-10% decrease in consumption. Advocates have been calling for a minimum penny per-ounce tax, which would raise the average price of SSBs by about 20%. But there is concern among advocates that a penny per-ounce may be insufficient because the industry can easily absorb that cost into their entire product line, making the increase in shelf price barely (if at all) noticeable to customers. Several former high-level SSB industry executives corroborated this concern in a phone meeting held with advocates this year, organized by the Center for Science in the Public Interest and the Seattle/King County Department of Public Health. On the other hand, industry shareholders may not approve of an absorption of the tax increase across the product line, as it would reduce profits.

Excise taxes on a local level are technically difficult to achieve, and in some cities, prohibited by state law. Local advocates may want to focus on business license fees or sales taxes at that level, depending on what's allowed by state law.

Counteracting industry arguments about jobs

Given the current unemployment rate in the country, the industry hits a raw nerve with the public and legislators when it publicly proclaims that an SSB tax will result in job losses. To reinforce its message, it recruits placard-carrying union members to pack SSB tax legislation hearings. A study is currently underway at the University of Illinois, Chicago, which is looking at the potential impact of a tax on jobs. In the meantime, we rely on invoking the tobacco tax experience, which did not result in job loss; and asserting that the industry will still be in need of manufacturers, bottlers, distributors and truckers to handle the vast array of diet, low-calorie, full-calorie, and water beverages it produces.

One step advocates should consider taking is to convene union leaders to discuss the issue. Possible groups to approach include nurses, hospital workers, teachers, police, firefighters, and custodians. In addition, members of other types of unions may already be in favor of eliminating SSBs from their workplaces (e.g. hospital workers), and could be encouraged to show their support of the taxes to counteract the beverage industry unions' message.

Counteracting industry arguments about regressivity

The industry plays heavily on the argument that taxes will hurt poor people the most. This reinforces its "nanny state" argument and influences politicians to speak out against the taxes in order not to appear to discriminate against their poorer constituents. There are still some public health advocates who will not endorse taxes because of regressivity. Advocates' need to take control of the "regressive" conversation by:

- Re-framing the message that the tax is not regressive (when technically it is);
- Enlisting the help of respected local and national leaders to publicly reinforce the idea that low-income communities stand to benefit most from the revenue;
- Ensuring that earmarks include specific language on programs for low-income communities;
- Gaining the support of organizations which represent low-income people and communities of color. Local polls which gauge people support for taxes may help as well.

Some advocates suggest an alternative response: don't respond at all to the regressivity argument. But given that the industry will most likely keep this argument alive, it seems more prudent to be fully prepared to respond to it. Our lack of preparedness on this, and other messaging issues on SSBs, is one of our weakest points. It was agreed in the larger NPLAN symposium, as well as in this breakout session, that we are in need of significant, dedicated funding to do the research and create the resources necessary to help us frame these public health messages. They must resonate with the public and with legislators, and, to the degree possible given regional and cultural differences, be consistent across the country.

Counteracting industry tactics: Sponsorship and grants

One tactic taken directly from the tobacco “playbook” is the industry’s increased “philanthropy” in the form of sponsorships and grants, which are typically given to institutions and organizations which have been hard-hit by the recession. By claiming to be “part of the solution,” the industry curries favor with schools, local governments, hospitals, small non-profit organizations, and the public by funding “feel-good” initiatives. A recent example is Coke’s “extraordinary commitment” to the Seattle Center as a Premier Partner of the 50th anniversary celebration of the 1962 Seattle World’s Fair, which will take place from April to October of this year. In exchange for its donation, a “full spectrum of Coca-Cola products will...appear around the Center grounds....”⁵ as Coke offers a “quality experience to the millions of visitors” to the Center. In another “philanthropic” gesture, the American Beverage Association in 2011 gave Children’s Hospital of Philadelphia (CHOP) a \$10 million grant. These donations are part of a carefully-planned strategy to counteract public health efforts and win the public’s approval and loyalty: Coke’s arrangement in Seattle comes on the heels of that city’s message campaign urging people to drink less soda; the money given to CHOP was a thinly-veiled attempt to ensure the defeat of any future efforts by Mayor Nutter to impose taxes on SSBs in Philadelphia.

Marketing and holding the industry accountable

As documented in a November 2011 [report](#) by the Rudd Center, the beverage industry continues to market relentlessly to all youth, and Black and Latino youth in particular, despite pledges to the contrary.

Challenges for advocates include:

- finding ways to keep children from becoming brand-loyal at an early age;
- exposing the industry’s focus on the production and marketing of energy drinks containing the addictive combination of caffeine and sugar; and
- finding the right messages to convince the public that the industry has only its bottom line, and *not* people’s health, in mind.

The industry uses basic marketing tactics, finding the right ingredients and emotional messages to hook people on its products. Advocates need to expose those tactics, continue to raise the public’s awareness about the hazards of SSB consumption (perhaps by using more emotional messages), and push for other ways to decrease it. Other methods could include encouraging city councils and private institutions to change their procurement policies, use other incentives/disincentive pricing strategies, and introduce portion-control initiatives to “de-normalize” consumption, as was recently proposed in New York City. (Sugary beverages larger than 16 ounces could not be sold in any business that is subject to regulation by the Health Department.)

Building popular and public health support for a tax

A handful of polls done in different states in the country show an increased support for taxes if the funds are earmarked for childhood obesity prevention. Advocates’ challenge is to build on that popular support.

A possible strategy would be to involve those people who could benefit most from the tax, including teachers, firefighters, and police (whose salaries could be funded if the tax is only partly earmarked). These groups are politically powerful, and can be potential allies. Parents and children (especially teens) could also be a focus for grassroots support and advocacy.

In addition, public health advocates working specifically on SSBs need to reach out to, and get support from, the entire obesity prevention movement, on taxes as well as other pricing incentive and consumption-reduction policies. Among other things, advocates should make a concerted effort to get SSBs onto the agenda of national, state, and regional obesity-prevention conferences, write more scholarly papers, policy briefs, news articles and op-eds, and use social media, to promote the idea of an SSB tax.

What do we need to be successful in 2013?

The movement needs to build two support systems to be successful with a tax in 2013:

- 1) *Convene a small strategy group.* This group will provide a “safe” and confidential place for key advocates and experts to discuss strategy. The existing SSB listserv, run by the Center for Science in the Public Interest, is thought not to be secure from industry eyes, and its membership has become too large to have targeted conversations on strategy. While the listserv has been important for building momentum, it is used now mostly to send news items and share resources. The initial strategy group membership could include representatives from the groups listed above (under Accomplishments So Far), and expand from there, with the recommendations of that group. This group could decide on how and when to include and communicate with other advocates not directly involved. Separate groups may be needed for state and local efforts.

- 2) *Find and fund an advocacy leader.* In 2009-2011, Save the Children lent crucial support to states considering tax proposals. They coordinated polls, arranged outreach and press conferences, gave technical assistance to local advocates, and testified at hearings. Their decision to discontinue the work left a vacuum that needs to be funded and filled immediately. The leader could continue to organize campaigns in multiple states, as Save the Children did, to showcase national momentum and pull the beverage industry in multiple directions at once.

Other needs

The list below summarizes advocates’ ideas of specific research, materials, and support systems that are needed in order to be successful in 2013.

RESEARCH, DISCUSSION AND MATERIALS NEEDED

Issue: Earmarking

Research/discussion:

- Historical trends in earmarking in states:
 - Where is it done and how often?
 - Is it more likely in certain states than others? What distinguishes those states?
 - What are the political deterrents and how can they be overcome?
- What strategies can help ensure funds are earmarked?
- How can we ensure the majority of funds will be

Materials:

- A policy brief for legislators outlining:
 - the rationale for earmarks
 - what form they should take (including evidence-based suggestions)
 - how to gain support for them, including messaging
 - model set of questions to use
-

earmarked for programs focused on low-income communities?

- Do we support a tax bill that doesn't include earmarks?

in public opinion polls to gauge support

Issue: Jobs

Research/discussion:

- More research on job loss to complement Lisa Powell's work (noted above).
- What are the lessons learned from tobacco: how did advocates respond to job loss arguments industry? Do they work for the SSB issue?
- How do we convince unions to work with us?

Materials:

- Written report including
 - Lessons learned from tobacco
 - Data contradicting job loss argument
 - Media sound bites for legislators and advocates

Issue: Regressivity

Research/discussion:

- What are the lessons learned from tobacco: how did advocates respond to regressivity arguments from the industry?
- How do we engage community leaders who will direct the conversation away from regressivity and toward the idea that a tax will benefit low-income people?

Materials:

- Media sound bites
- Language for legislators and advocates to use in hearings

Issue: Message Framing

Research/discussion:

- Where do we find funding to do messaging research?
- What are the messages that can be used nationally, and how do we engage the states and cities to use them so we have consistency?
- How do we frame the messages to appeal to:
 - all voters
 - low-income people
 - legislators
 - mothers/parents
 - do we focus on them?
 - do we demonize marketing practices, including "stealth" practices to convince children to buy SSBs? Or will parents reject our demonization?
- Can we use the same advertising tactic of appealing to emotions, as the beverage companies do?

Materials:

- Packet of media sound bites and other ways to "frame" the message
- List of industry practices used to sabotage parents' efforts to reduce their children's consumption

- How do we frame the messages to counteract:
 - the “sin tax” or “fat tax” frames
 - the industry’s biggest messages (what are they currently?)
 - the idea of large size = value

Issue: Tobacco lessons

Research/discussion:

- How did advocates get the country to support tobacco taxes?
 - Was it only after proof of harm from second-hand smoke?
- How did advocates overcome the lobbying power of the industry?
- What other lessons can we learn from tobacco?

Materials:

- A brief report to help advocates understand what worked in tobacco, and what aspects can be used with SSBs

Issue: Holding the industry accountable

Research/discussion:

- Do we target the brand or the company? (It is one and the same in Coke’s case.)
 - What are the pros and cons of this tactic?
 - Should we focus solely on marketing practices and the impact on children?
- Portion sizes
 - Should we encourage other municipalities (whether or not New York City is successful) to limit the size of drinks allowed for sale in venues which are regulated by public health departments? The value argument: How do we frame the argument that larger sizes are harmful to health, and so not a “value”?
- Strategies to delegitimize SSBs as a drink of first choice with a meal

Materials:

- Policy brief on how to hold industry accountable

Issue: Involving health insurance industry

Research/discussion:

- Insurance company blacklist
 - Should public health do this? (e.g., if you insure Pepsi, our group won’t buy your insurance)
 - Insurance Co’s know these drinks are problem, but don’t have a way to take a stand. This could give them cover.

Materials:

- Policy brief for insurance companies to convince them to work with us.

- Should we bring together major health funder leadership to organize health insurance executives to make the case for a blacklist? (Executives from hospitals which are going “soda-free” may be a place to begin.)

Issue: Corporate sponsorship

Research/discussion:

- A compilation of industry tactics

Materials:

- A policy brief on the problem with corporate sponsorship, including:
 - A list of the all forms that industry donations take, with examples
 - A model policy for government and non-profits on not accepting sponsorships from the beverage industry

Issue: Involvement of other organizations within and outside of obesity prevention

Research/discussion:

- SSB taxes are a way to fund long-term systemic changes to community environments, once government and philanthropic money dwindles. How do we get this message out to other public health organizations and get them to agree to work with us?
- What organizations should be contacted?
 - Need to go beyond the national organizations most prominently involved in childhood obesity prevention.
- How can we work collaboratively to pressure the Department of Health and Human Services to require a Surgeon General’s report on the health effects of consuming SSBs?

Materials:

- Internal memo on the above

Other Issues

Research/discussion:

- How do we get greater youth involvement in the anti-SSB campaigns?

Conclusion and next steps

Advocates remain hopeful that an excise tax on sugar-sweetened beverages will be passed in 2013. In order to facilitate that happening, we need to fill the gaps in our research, produce much-needed materials, organize strategy discussions, and coordinate our efforts across the country.

While we continue to pursue an SSB tax, advocates should turn some attention to other pricing strategies as well. What do policy experts see as the viability of these other strategies? Can and should they be pursued simultaneously, or should the less-controversial (i.e. non-tax) options be pursued first in an effort to “soften the ground” for taxes? Which ones hold most promise? Once we assess their viability, we should create a “playbook” on how to reduce SSB consumption including a list of these policy options and the necessary steps to achieve them.

Many questions remain about the taxes themselves, as outlined in this brief report. The participants in the NPLAN sugar-sweetened beverage tax breakout group agreed that the next steps for advocates are to:

- tighten our responses to industry arguments;
- keep learning from tobacco;
- find the funding to do more research and writing;
- identify an advocacy leader and begin regular strategy session with technical assistance organizations and lead cities and states; and
- agree on the list of research and discussion issues, and get a commitment from interested organizations to produce needed materials.

This report was written by Roberta Friedman, Director of Public Policy, Yale Rudd Center for Food Policy and Obesity, and Christine Fry, Senior Policy Analyst, ChangeLab Solutions. June 2012.



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¹ See www.newsworks.org/index.php/local/item/21539-rally-against-proposed-soda-tax-circles-philadelphia-city-hall

² See The American Beverage Association’s [homepage](#), for “We’re Delivering. More Choices. Smaller Portions. Fewer Calories.”

³ See Yale Rudd Center for Food Policy and Obesity; Sugary Drink FACTS (Food Advertising to Children and Teens Score) Report; October 2011. www.sugarydrinkfacts.org/resources/SugaryDrinkFACTS_Report.pdf

⁴ See www.nofoodtaxes.com

⁵ See <http://centerspotlight.seattle.gov/2012/04/18/new-next-50-partner-coca-cola/>

Memorandum

June 19, 2012

To: Samantha Graff

From: Lori Dorfman

Re: NPLAN 2012 Symposium Food Marketing Session

This memo summarizes the major themes from the breakout session on marketing food to children. Members of NPLAN's recently disbanded Food Marketing Learning Community and interested others met to discuss the best ways to reduce youths' exposure to the marketing of unhealthy foods through regulation, policy and effective industry self-regulation. Most participants are members of the Food Marketing Workgroup and so the starting point of the discussion presumed a high level of understanding of the issues, the history and the strategies for moving forward.

The breakout group began its deliberations by considering two alternative interpretations of the disappointing stall of the Interagency Working Group on Food Marketing to Children (IWG). By way of background, the 2009 Omnibus Appropriations Act created the IWG, a collaboration of the FDA, CDC, USDA and FTC, charged with developing guidelines for which foods ought be marketed to children and which should not. After much delay, the IWG issued draft voluntary guidelines for public comment in April 2011; by the close of the comment period the FTC had received 29,000 comments. On October 12, 2011, the House Energy and Commerce Committee Subcommittee on Commerce, Manufacturing, and Trade and the Subcommittee on Health held a hearing on the guidelines. In December 2011, Congress inserted language into the appropriations bill requiring the IWG to do a cost-benefit analysis before releasing final guidelines. Since that time, FTC chair Jon Leibowitz told Congress regarding the IWG proposal that "it's probably time to move on" (<http://www.foodnavigator-usa.com/Regulation/FTC-chairman-on-IWG-proposal-to-curb-junk-food-marketing-food-to-kids-It-s-not-a-priority>).

The stalled IWG guidelines have been a major disappointment for those concerned about junk food marketing to kids. Leading the charge, the Food Marketing Workgroup marshaled all the resources it could muster to support the agencies and encourage them to release the guidelines. Advocates in the Food Marketing Workgroup with their allies



- coordinated two committees which each drafted detailed comments to the IWG on its proposed nutrition guidelines and marketing definitions;
- met with all the IWG agencies, elected officials and the White House to show support for the IWG;
- with PreventObesity.net and others generated 28,000 of the 29,000 comments submitted to the IWG during the public comment period;
- engaged economists at the Economic Policy Institute who published a paper to counter the erroneous claims food companies made about supposed economic consequences should the IWG voluntary guidelines be adopted;
- with NPLAN in the lead, organized nearly 40 legal scholars to speak out against industry's specious invocation of the First Amendment to thwart the voluntary guidelines;
- garnered press coverage in The New York Times, Washington Post, Adweek, The Hill, and Politico and placed ads in Politico and The Hill; and
- activated grassroots from various organizations to let companies know their customers are unhappy about their opposition to IWG standards—approximately 20,000 people sent letters to 15 food and beverage companies that had pledged to reduce their marketing to kids.

Despite these concerted efforts, the final IWG guidelines have not been released. One interpretation has to be that the advocates have failed.

But there is another way to interpret this unfortunate situation. If we pull the lens back and examine the larger—and longer—context of food marketing we can see that despite the frustrations around the IWG, advocates have made tremendous progress. The story really begins in 1977 when Michael Pertschuk was appointed chair of the FTC and initiated the rulemaking known as “Kid Vid” in an attempt to reign in food marketing to children because of concerns over dental caries. The response from industry nearly doomed the FTC itself as the National Association of Broadcasters rallied Congress and the Washington Post to rail against the effort. Fast forward almost 30 years to 2006 when the Institute of Medicine released its first major report on food marketing to children in the wake of growing concern about exploding childhood obesity rates, followed in 2009 by the FTC’s first report on food companies’ expenditures on marketing targeting children and youth. The rally behind the IWG—fueled by the IOM and FTC expenditures reports—constitutes the first serious national effort to address food marketing since the late 1970s.

The food industry reacted vigorously to the IWG. It hired the former communications director for Barak Obama to coordinate its efforts to fight the voluntary guidelines and commissioned legal scholars and economic reports



that, though based on dubious assumptions, alarmed elected officials about how issuing the guidelines would violate the First Amendment and cause catastrophic job losses. According to Reuters, food companies “have spent more than \$175 million lobbying since President Barack Obama took office in 2009, more than double the \$83 million spent in the previous three years, during the Bush Administration.” In almost the same moment the IWG released its draft voluntary guidelines, the Children’s Food and Beverage Advertising Initiative (CFBAI)—the industry’s major self-regulatory scheme, itself a reaction to growing concerns about childhood obesity in the wake of the first IOM report—announced that its 17 member companies would adopt a single unified standard for foods it would deem acceptable to be marketed to children under 12. While the standards are much weaker than what the IWG has proposed, a unified standard is an improvement and something public health advocates have called for since the CFBAI was announced.

A second interpretation, then, can be that public health advocates have put the multinational, multi-billion dollar food and beverage industry on the defensive, forced it to spend huge sums, and instigated a significant change in its marketing practices.

With this rich background, the breakout group considered a number of issues relevant to reducing food marketing to children and youth—substantive and strategic—that could be employed to keep the food industry on the defensive and change how the industry markets to children and youth. And the group highlighted the need for a robust infrastructure to keep the substance in front of the public and policy makers at strategic moments.

Substantive Issues

Addiction: David Kessler’s morning presentation to the Symposium highlighted the issue of food addiction and this fall Kelly Brownell’s edited volume on food addiction will be published. The breakout group suggested that a meeting to bring together experts and lawyers on food addiction could help us better understand the implications of the issue and generate strategies for restricting food marketing to kids.

Defaults: There is a growing body of literature describing the effect of defaults on food decisions individuals make. Understanding decision fatigue, habit, and subconscious choices—and helping the public, parents, and policy makers understand the implications—could provide added support and a good rationale for restricting food marketing to children and youth.



Digital marketing: The latest marketing techniques, including neuromarketing, viral practices, direct outreach to “mommy bloggers” and others, mobile marketing and the data collection behind it all (see <http://www.nytimes.com/2012/06/17/technology/acxiom-the-quiet-giant-of-consumer-database-marketing.html?ref=todayspaper>), are flying under the radar of most parents and policy makers. It is important to monitor the latest food marketing techniques and also to publicize them so parents and others can see what the industry is doing to attract children and youth. The upcoming negotiations on Internet privacy sponsored by the White House provide an opportunity to highlight digital food marketing.

Schools: The breakout group did not delve into various strategies for limiting food marketing in schools but did note that schools remain an important terrain for our efforts to reduce children and youths’ exposure to junk food marketing, in part because schools can have a profound effect on establishing social norms.

Adolescents: The group discussed the various places adolescents are addressed explicitly in the IOM report, CFBAI, and FTC expenditure report as well as the political liability of focusing on adolescents rather than children.

Federal tax deductibility of marketing: The group discussed the advantages of calling for junk food marketing to children to be exempted from the tax deductibility afforded advertising in general. While unlikely to win full support, highlighting the issue would be controversial, focusing attention on food marketing and likely alert those who are unaware that as taxpayers we subsidize junk food marketing. Such a proposal may even get a serious hearing in our tight budget times.

Strategic Considerations

Press opportunities: The breakout group suggested that it would be important to use every opportunity to keep attention on the industry’s marketing practices. For example, today BMSG’s and PHAI’s study in the PLoS Medicine special issue on Big Food comparing soda company corporate social responsibility campaigns to those of the tobacco industry garnered news attention that explored problems with soda marketing. The FTC report on expenditures, due this fall, will be an opportunity to raise the visibility of the issue and mobilize parents and others who can be encouraged to express their outrage to policy makers and to the marketers themselves. A rapid response system equipped with the resources to act quickly and broadly could be put to good use to respond to breaking news.



Mobilizing parents: In addition to the other press opportunities, the group suggested that proactively keeping a spotlight on the most egregious examples of food marketing can also activate parents. The industry is terrified of losing the trust of moms but advocates also need to understand who parents will listen to on media and nutrition issues. The group noted that a major social marketing campaign was the only recommendation from the original Institute of Medicine report on food marketing to children and youth on which there has been no movement.

New allies: Potential for other issue groups to join the food marketing fight exists, as the recent involvement of the Environmental Working Group attests. Other organizations primarily concerned with religion or medicine might also be recruited.

State focus: The breakout group identified the potential for policy at the state level, particularly the potential for engaging attorneys general in the issue.

Infrastructure Needs

While the Food Marketing Workgroup, NPLAN, and others are eager to keep the focus on egregious ads, mobilize parents, and take advantage of upcoming opportunities to put food marketing on the national agenda, the breakout group emphasized that the field's resources are limited, nowhere near the sort of investment made in the Campaign for Tobacco-free Kids, for example, or the opponents in industry. The breakout group noted that the advocacy infrastructure needs substantial support to be taken to scale. The need for such infrastructure is more important than ever as Congressional actions (e.g., 503) have made policy action from government agencies more difficult.

The bottom line: The breakout group emphasized the need to pursue the dual strategies of 1) keeping the food and beverage industry on the defensive and 2) mobilizing parents and others who can keep the heat on companies and appeal to regulators. With this concerted effort, advocates' persistence will pay off in an environment that is not saturated with aggressive, appealing food marketing to children and youth. Only then will parents have a fair chance to institute and maintain the sorts of eating patterns that grow strong bodies, sharp minds, vibrant spirits and healthy communities.