

The Great American Food Fight: Public Policy Surrounding Childhood Obesity

Imagine yourself as a child. Amidst exams, research papers, work for your profession—all of the deadlines you have to meet and constraints you must overcome—envisioning that you are a child again might seem like a very pleasant endeavor. But is it really? Take a moment to visualize.

It is a school day, a Friday. You are awakened in the morning, dress into your favorite Coca-Cola t-shirt, and, while watching a commercial depicting Sponge Bob Square Pants advertising string cheese, you begin consuming a bowl of your favorite cereal, Trix. After all, Trix are for Kids. Following breakfast, you are driven to school, located no more than 400 feet from where you live, because your mom or dad, or both, feel it is too unsafe an environment for you to walk. At school, you mingle with peers who use “supersize” as a verb (Brownell & Horgen 9, 2004). You participate in little or no physical education whatsoever, but spend any free time that you do have playing computer games. For lunch, you stock up from the vending machines, on whose soft drink and candy sales your school relies for additional funding. During 7th period, you are presented with a candy bar fund-raiser packet by your homeroom teacher in order to raise money for a class fieldtrip. After school, you quickly snack on one of Frito-Lays Go Snacks, Doritos stuffed into a plastic container shaped like a water bottle. As Frito-Lay advertises, the new packaging suits ‘the active, fast-paced lifestyles’ of American consumers (Kelly 29, 2004). While snacking, you are rushed to a birthday party at one of McDonald’s 30,000 restaurants. After all, Ronald McDonald is popular; he is the second most recognized figure in the world (Santa Claus being the first), and he speaks twenty-five languages including Hindi (Kelly, 2004). Tomorrow, you get to have your picture taken with the Kool-Aid pitcher who smiles. Nonetheless, days such as this continue for you throughout the school years. You become overweight. You develop what used to be referred to as Adult onset diabetes at the age of 10. You are at risk of needing coronary bypass surgery by the time you are 25. Like millions of other Americans—men, women and children—you have become a victim of the “poor diet and sedentary” lifestyle environment which looms over America like a black cloud (Brownell & Horgen 3, 2004). Needless to say, the health care resources of the U.S., as well as the chances for America’s children to have a potential healthy, productive future are being poured upon.

Sadly, childhood obesity is a reality, as well as a national emergency.¹ In their most recent and largest assessment of public school students, the U.S. Center for Disease Control and Prevention (CDC), as part of the U.S. Department of Health and Human Services (DHHS), found that 4 in 10 students are overweight, and that obesity in children is advancing much more quickly

¹ For clarification purposes, it should be noted that “obesity” (i.e. heaviness) and “overweight” are used interchangeable throughout this section, and refer to the characteristic of weighing beyond what is considered the “average” healthy weight of a particular age group (child size remaining a factor).

than the CDC and others predicted (Child, 2004). In the past 20 years alone, the percentage of children aged 6-11 who are overweight has nearly doubled from 8% to 14% and from 6% to 12% among adolescents (Nestle 7, 2002; U.S., Sept. 2004). To expand upon just how bad children's nutrition intake is becoming, in the year 1997 specifically, researchers K.A. Munoz et al. (1997) found that American children obtained a monstrous 50% of their calories from added fat (35%) and sugar (15%), and only 1% of them regularly ate diets that resembled recommended proportions of the USDA's infamous *Food Pyramid*. The diets of 45% of all U.S. children failed to even meet *any* of the recommended servings on the pyramid (Nestle, 2002).

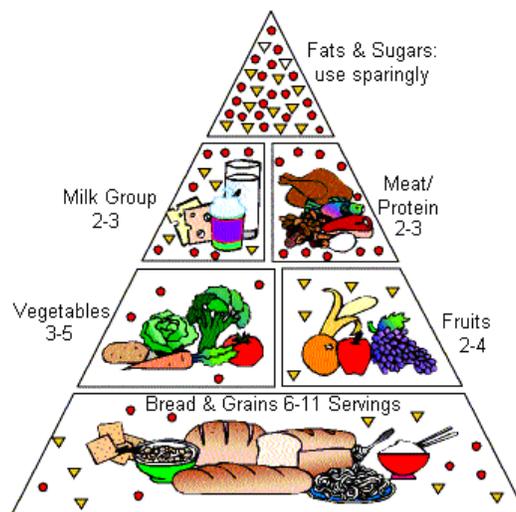


Figure 2.1. Most Americans are familiar with the *Food Guide Pyramid*, which was first published in 1992 by the USDA. However, most Americans are confused by the recommendations and therefore do not know how to use it. Proof of this, according to the USDA, is the fact that two out of every three Americans are overweight. For instance, most people assume that they could have anywhere from 6-11 recommended servings of the bread and grains group, yet 11 servings are for those individuals with high metabolisms, such as teenagers. Some older adults would not burn the calories provided by all 11 servings in a day, which is why 6 servings for them would be sufficient. Recently, the USDA Center for Nutrition Policy and Promotion has polled the public for comment on whether to update or place the pyramid with something more efficient. The next food guide graphic, along with revised dietary guidelines are expected to be published by the USDA and DHHS in early 2005, and are proposed to help Americans make better decisions regarding eating habits (Dreyfuss, 2004).

Introduction: Personal and Public Costs of Childhood Obesity

The costs associated with the rise in obesity in children are alarming, from both a national and individual standpoint. If the rising percentage of childhood obesity is not curtailed, it has been testified by Eric. M. Boost, Secretary of the USDA Food, Nutrition and Consumer Services, that many children of this generation will not outlive their parents (U.S., Sept. 2004). Obese persons can live on average 7 years less due to a higher prevalence of disease and detrimental psychological effects (U.S., Sept. 2004). Psychological effects of the obesity epidemic include stress, depression and anxiety (U.S., Sept. 2004; Nestle, 2002). In regards to illness and disease, obesity is associated with children having high levels of cholesterol, high blood pressure, bone and joint problems, and earlier and earlier diagnoses of “adult”-onset Type II (insulin resistant) diabetes; all of these factors increase children’s chances of having a stroke, heart attack, hypertension, coronary heart disease, and additional cardiovascular and other chronic diseases later in life (U.S., Sept. 2004; Nestle, 2002). It should not be overlooked that obesity rates and therefore increasing health problems are particularly prevalent among African American, Hispanic-American and American Indian communities (U.S., Mar. 2004; U.S., Oct. 1998; Child, 2004; Nestle, 2002). For instance, in the early 1990s, R.P. Troiano et al. (1995) determined that 23% of white females aged 6-11 were overweight compared to the 29% of Mexican-American females and 31% of black females (Nestle, 2002).

No matter the ethnicity of obese persons—specifically children—throughout the U.S., society as a whole is facing enormous obesity expenses. In solely the year 2000, obesity cost the U.S., both directly and indirectly, \$117 billion. Overall, a 37% increase in annual per capita Medicare spending can be attributed to obesity; in 2003 the public paid an estimated \$39 billion (or \$175 per tax payer) through Medicare and Medicaid programs for obesity-linked illnesses. It

is estimated that, in regards to total health care costs in the U.S., obesity accounts for \$92.6 billion in direct medical expenses, including \$127 million in annual hospital costs for obesity-related disorders in children and adolescents (U.S., Sept. 2004).

Clearly, taxpayers have no choice but to foot some of the bill for obesity in children. Yet ironically, the U.S. Federal Government's role in preventing and reversing this obesity epidemic has been somewhat limited. In fact, until only recently has the federal government, in actuality, regarded obesity as a serious issue. Although obesity rates in the nation's children have been substantially increasing over the last 20 years, the *first* Surgeon General Report on obesity (*The General Surgeon's Call to Action Prevent and Decrease Overweight and Obesity*) by the DHHS was only issued in 2001 (Brownell & Horgen, 2004). Furthermore, government funding for research on obesity, particularly in children, is a far cry from being adequate especially when considering obesity's high prevalence in and costs on society. Government funding for biological research remains far greater than research intended for environmental contributors and prevention of obesity; this is even after the Institute of Medicine released a 1995 report stating that the increase in obesity levels is due to environmental factors, rather than genetics (Brownell & Horgen, 2004).

Introduction: Childhood Obesity: Whose Responsibility is it, anyway?

Aside from other origins of rising obesity—change in eating patterns, technological advances, diminishing street safety, knowledge barriers, food marketing and labeling, and heavy subsidies for food producers (all which will be discussed in the following paragraphs)—childhood obesity also lies at the forefront of another significant overarching story, or dichotomy even. This dichotomy shall be referred to as the “cake controversy” for reasons discussed below.

There exist two sides to this cake controversy, both having to do with the U.S. Federal Government's role in addressing childhood obesity. On one side are those who insist that the government does not have the authority to act as the "Twinkie police" in legislating eating less or exercising more (Zernike, 2003). In other words, the government cannot dictate what is best for the American public, but rather citizens need to decide what is best for their health based on personal choice and responsibility. On the other side are those who feel it is an obligation for the government to use its legislative power to, as Kate Zernike of the New York Times writes, "slim down an increasingly obese nation" (2003). These latter individuals would advocate such measures as banning foods of minimal nutritional value in schools and putting sin taxes on soft drinks.

Largely, efforts from both sides are shaping what is beginning to be referred to as the great American food fight. As suggested by Zernike, this controversy regarding government intervention can be summed up in the following manner: 'let them eat cake' vs. 'let them eat cake, but not until they are informed that it contains 760 calories and 44 grams of fat per slice' (2003). Thus, it is suggested that both the general public as well as government policymakers are divided in how much government should become involved in addressing the issue of obesity. For instance, a recent poll by the Harvard School of Public Health suggests that similar to government policymakers, half the public regards obesity as a private issue, while the other half believes obesity is a public health concern that society needs to solve with the government's support (Zernike, 2003).

One significant example of the cake controversy involves a recent bill recently approved by the Senate Committee on Health, Education, Labor and Pensions. This bill is entitled the *Improved Nutrition and Physical Activity (IMPACT) Act* (which will be discussed in greater

detail later in this report) and it provides grants that will help make available health services for increased obesity prevention and physical activity (U.S., Mar. 2004). Nonetheless, as stated within the bill's report, a total of 8 senators disagree with the Senate Committee's own assertion of what the federal government's role in reducing obesity should resemble.² In an "Additional Views" section of the report, the signatories (8 senators) note among other beliefs that they "strongly disagree with this report's assertion that the role of the Federal government may be limited" (U.S., Mar. 2004). They continue, in stating:

On the contrary, the tremendous health and financial consequences of overweight and obesity compel a greater Federal role in the war against obesity. As stated by DHHS Secretary Tommy Thompson (September 2001) 'We need to act, individually and as a nation, to prevent obesity and diabetes.' (U.S., Mar. 2004)

Overall, the "Additional Views" section of this IMPACT bill is significant in that it raises a very pertinent issue, which cannot be overlooked when considering the extent of the responsibility that the Federal government has in addressing health risks, such as obesity, faced by American children. The fact is, in order for any issue (e.g. obesity) on the social and political agenda to be successfully and adequately addressed, the "marble cake" reality of the U.S. Federal system needs to be considered. As explained within Introducing Public Administration (2005) by Jay M. Shafritz and E. W. Russell, the popular image of layers of government being separate entities from one another (one layered neatly on top of the other) is quite deceptive. Rather, the U.S. Federal system is more like a marble cake in that "cooperative relations among the varying levels of government result in an intermingling—not a layering—of activities" (Shafritz & Russell 165, 2005).

² Senator Signatories of the *Improved Nutrition and Physical Activity Act* "Additional Views" include Senators: Patty Murray, Hillary-Rodham Clinton, Jeff Bingaman, Barbara Mikulski, Jack Reed, Tom Harkin, Chris Dodd, and Ted Kennedy.

Notably, this marble cake viewpoint means that the issue of childhood obesity will be most effectively considered as the responsibility of Federal, State, *and* local governments, including local organizations and school districts. Therefore, in order to tackle obesity effectively, a strong infrastructure “to support health diets and regulate physical activity” requires collaboration, not confrontation on all levels of government, not just the Federal (U.S. 113, Mar. 2004). Perhaps no other government official summarizes the interplay required to fight childhood obesity better than Secretary of Agriculture Dan Glickman. During the USDA’s first government conference on childhood obesity, entitled *Childhood Obesity: Causes & Prevention Symposium*, on October 27, 1998, it Glickman who stated:

As we talk at this conference about causes and prevention, we need to think about the roles that each of us can play—government, doctors, schools, parents, communities, industry, and producer groups, even the media. We all have an influence, and we all have a duty. That duty is to recognize the simple fact that it does take a village to raise a healthy child. [...] This [childhood obesity] is a complex issue because it overlaps with some very sensitive areas: personal choice, culture, economic status. So we’re not here today to impound the Taco Bell Chihuahua or unplug the Coke machines or ban Happy Meals. We are here to arm America’s families with the facts, and to develop effective strategies aimed at helping our children live healthy lives and have fun eating right. (U.S. 63-64, Oct. 1998)

Introduction: The Purpose of this Report

Collectively, the purpose of this report is to provide you as the reader with an overview of the most pertinent and recent *Federal* strategies to combat public policy surrounding

childhood obesity. As suggested in previous paragraphs, childhood obesity and its associated health implications is surely a problem not only for American children, but for society as a whole. Again, it is the responsibility of governments' and individuals' of all disciplines (media, industry, teachers/administration, parents) to work for the improvement of children's welfare, whether through policy making or encouraging kids to run and play for 30 minutes after school.

As a side note, this paper discusses only Federal initiatives regarding childhood obesity not merely because of space constraints, but also because Federal initiatives provide an important *first step* in establishing support for education, research, and community-based interventions (U.S., Mar. 2004). For instance, Federal strategies can establish consistent standards countrywide, ensuring a national campaign from which all levels of government and individuals can pull resources from. Keep in mind that this Federal-only summary is not to suggest that childhood obesity should be tackled using solely a "top-down" approach. Also, before Federal government initiatives are to be discussed, a clear understanding of the influences of childhood obesity should first be established.

Living Within a Toxic Environment: Public Policy & the Pressure Playground

When considering the serious health problems and reduced quality of life that more and more children are facing today, it becomes most easy and *convenient* to blame parents. Yes, to an extent it cannot be denied that the increased rate of obesity among children may indicate poor parenting with respect to parents providing limited supervision on children's nutrition and physical activity. In their study entitled "Parental Neglect During Childhood and Increased Risk of Obesity in Young Adulthood," researchers Lissau & Sorensen (1994) found that poor parenting predicts the presence of obesity in young adulthood no matter the age, body-mass index, sex, and social background of the child. Furthermore, an additional study by Abramovitz

& Birch (2000) reveals that those 5-year-old girls whose mothers were currently dieting held some very interesting perspectives about dieting verses those girls whose mothers were not. When asked what is a diet?, responses of the 5-year-old girls included: “You do not eat; to lose weight; drink diet soda.” When asked what do people do when they are on a diet, responses of the same 5-year-old girls also included, “Do not eat; exercise; drink something.”

Significantly, both studies illustrate that what is going on in the home is a very important factor on the eating and exercise habits of young children. Sadly, one of the most influential developments in changing the interaction between parents and children over food was the introduction of microwavable food in 1974. A family environment, in which parents allow for microwavable foods to generate complete parental *lack* of discretion over food intake and preparation, cultivates, not surprisingly, considerable detrimental effects on parent/child interrelationships surrounding (1) eating, (2) a child’s perception on wholesome choices regarding diet and exercise, and (3) the child’s health (U.S., Oct. 1998).

Nonetheless, placing blame of childhood obesity solely on parents is overly simplistic. In other words, additional causative factors of childhood obesity exist and should be discussed; experts of Federal health agencies, the Institute of Medicines, and other academic and professional circles advocate that there exist a complex interplay of behavioral, genetic and specifically environmental factors that contribute to the development of childhood obesity (U.S., Mar. 2004; Nestle, 2002). To put it bluntly, parents face numerous barriers when it comes to trying to keep their children healthy. Barriers include an inadequate knowledge base, as well as an assortment of pressure from common U.S. public policy that, in effect, undermines sound nutritional practices. In regards to the former, an inadequate knowledge base undermines parents’ ability to make appropriate nutritional choices for their children, especially when it

comes to children eating outside of the home (U.S., Mar. 2004; U.S., Oct. 1998). For instance, senator signatories of the previously discussed “Additional Views” section of the IMPACT report explain that, in a study conducted by New York University and the Center for Science in the Public Interest, researchers determined that even well-trained nutrition professionals were unable to accurately estimate the calorie content of typical restaurant food (U.S., Mar. 2004). How can parents be expected to accomplish this same feat without substantial help, when even nutrition professionals cannot?

Overall, experts refer to the compilation of barriers that parents collectively face as the “toxic environment” (U.S., Mar. 2004; Brownell & Horgen, 2004). Kelly Brownell & Katherine Horgen, in their Food Fight: The Inside Story of the Food Industry, America’s Obesity Crisis, and What We Can Do About It, write, “*Toxic* is a powerful word, but powerful language is needed to describe the situation” (7, 2004). The fact is, everyday a societal environment infected with conditions that fail to support healthy eating and physical activity, grabs our nation’s children and simply will not let go. Ultimately, we have childhood obesity as an epidemic to show for it (Brownell & Horgen, 2004).

Why all of the Inactivity? : Physical Activity as a Key Player

Physical activity is a critical key player of the obesity equation (Brownell & Horgen, 2004; U.S., Oct. 1998). Although the CDC recommends 30 minutes of moderate physical activity five times a day, Brownell & Horgen (2004) suggest that almost half of all children in the U.S. do not participate in *any* physical activity; fifty-five-year old adults are more likely to exercise! The presence of physical activity has been time after time directly correlated with lower rates of heart disease, diabetes, high blood pressure, stroke, colon cancer, and of course, obesity (Fields, 2004; Brownell & Horgen, 2004). Reasons for the inactive children population

are many, but include the increasingly absence of safe streets, as well as the fact that only a minority of communities possess paths designated for walking and biking (Brownell & Horgen, 2004; Nestle, 2002; U.S., Oct. 1998). Numerous communities, especially those of low-income, do not even possess public spaces and facilities where children can safely engage in playtime and physical exercise at all (U.S., Mar. 2004). Consequently, fewer than 10% of our nation's children regularly walk or bike to school compared to 66% thirty years ago (even bike sales have decreased compared to the 1970s)(Brownell & Horgen, 2004).

It's a Start: Safety & the U.S. Department of Transportation

Although the issue of street safety is not explored extensively in this paper (in fear of going far and beyond the topic at hand), one positive initiative by the U.S. Department of Transportation should be mentioned so that its importance is not undermined. The Department of Transportation is seemingly beginning to do its part in encouraging physical activity among Americans. Collaborating with a number of non-profit and a few for-profit organizations, the Department of Transportation developed "Partnership for a Walkable America." This partnership serves as a tool for parents and children to evaluate their community and point out ways in which streets in their community can be improved to enhance safety and walkability (U.S., Oct. 1998). Nonetheless, this is at least one attempt by the Department of Transportation to tackle the tendency of roads and bridges being built that do not support safe alternative modes of transport, such as bicycling and walking (U.S., Oct. 1998). One can only hope that physical fitness and ultimately obesity will become a stronger component of the department's agenda in the future.

Schools & Budget Constraints

Budget constraints in schools are another reason why only one in every four children gets the recommended physical exercise (U.S., Mar. 2004). As of the year 2000, only the state of

Illinois requires daily physical education (PE) to be incorporated into class curriculum, yet school administrations are not to be blamed; the rather grueling financial realities of schools are the true culprits. It is these financial realities that persuade schools to rely on other avenues of revenue, such as the sales of soft drinks, candy and snacks from vending machines to uphold academic components (Brownell & Horgen, 2004; U.S., Mar. 2004; U.S., Oct. 1998). Pressures by the government to improve academic achievement scores prompts school administrators to cut classes that presumably have no relevance on standardized achievement tests (i.e. PE courses). For instance, the state of Georgia eliminated all PE in grades six through eight in order to add 30 more minutes of academic courses to schools' curriculums. Consequently, from a national standpoint only 29% of our nation's children currently participate in physical activity classes compared to the 42% in 1991. Sadly, in regards to the PE classes that still do exist, Simons-Morton et al. (1993) found that on average, a child is only "aerobically active" for 3.5 minutes in an average gym class (Brownell & Horgen 78, 2004). On a related note, Sallis et al. (2001) determined that children who are not engaged in structured physical activity through PE classes are unlikely to be active during unstructured time elsewhere in school (Brownell & Horgen, 2004).

From Dell to Disney: Television, Computers, and Video Games as Obesity Culprits

School administrations, parents, scientists, and Congressman alike would probably agree that technology is also contributing to laziness within American society. People brush their teeth with an electric toothbrush, play golf with a car, E-mail rather than walk to the desk of another colleague, shop over the internet, rely on a remote control to change TV channels so that they do not have to get up from the couch (Brownell & Horgen, 2004). "Who is one of the most recognizable father figures by children in America," asked Glickman, Secretary of Agriculture,

in 1998? “Homer Simpson. He sits on the couch, watches TV, drinks beer, eats chips and falls asleep” (U.S. 66, Oct. 1998). Sure, Homer might be comical, but he spends all of his free time carrying out unhealthy lifestyle habits. And he has no shame in doing so. Such “Homer Simpson” examples, as well as changes in society (i.e. increasingly unsafe streets), are provoking children to ignore out-of-home activities and rather stay at home so that they can watch TV, surf the internet, and play video games (Nestle, 2002). Recognizing this remarkable change in children’s lifestyle patterns, Dell Computers began endorsing their products by featuring an ad depicting children standing around a computer at home with the caption ‘Stay in and Play’ (Brownell & Horgen 77, 2004).

Time to get Physical: National Youth Media Campaign (VERB)

In a valid attempt by the Federal government to promote an increase in physical activity and other positive activities for children, primarily between the ages of 9 to 13, the National Youth Media Campaign was launched in July 2002 by the CDC (Sedentary, 2002). Referred to as VERB (endorsing the slogan “It’s What You Can Do”), the Youth Media Campaign was launched with the initial budget of \$125 million (U.S., Mar. 2004; Sedentary, 2002). As stated in an article following VERB’s unveiling, “The message is simple: Verbs are active and *kids* should be too, so pick your favorite verb—run, skip, swim, dance, play, volunteer, join clubs—and do it” (Sedentary 06d, 2002).

In order to ensure VERB’s popularity among children, the campaign called for short television commercials featuring “action verbs morphing into a child’s form” (Sedentary 06d, 2002). These commercials for children aired after school during prime time, on weekends, and even on Channel One. To be discussed in later paragraphs, Channel One is a ten-minute news programming that is featured daily in numerous schools across the country; it has been

repeatedly scrutinized for its substantial amount of food advertising targeting students (Brownell & Horgen, 2004; Nestle, 2002). Verb has also been promoted through ads on billboards, the radio, in magazines such as *Teen People* and *Sports Illustrated for Kids*, as well as through its website www.verbnow.com (Sedentary, 2002). Is all of the marketing working?

It was the *Improved Nutrition and Physical Activity (IMPACT) Act*, passed in the Senate in December 2003, that began requiring the DHHS Secretary to begin reporting on VERB's effectiveness in altering children's behaviors regarding physical activity and reducing childhood obesity (U.S., Mar. 2004). First-year evaluation results were very encouraging, allowing VERB to achieve a reputation as having one of the largest effects in increasing physical activity in the nation's youth. As results from an independent research company's Youth Media Campaign Longitudinal Survey reveal, VERB attributed to a 34% increase in weekly free-time physical activity in 8.6 million children ages 9-10 across the U.S.(National, 2004). Furthermore, increases in children's physical activity were more eminent in communities that received higher levels of VERB marketing (National, 2004).

Despite evidence of VERB's effectiveness thus far, it cannot be overlooked that the administration under George W. Bush has opted to cut funding of the National Youth Media Campaign (U.S., Mar. 2004). Although the campaign has received approximately \$200 million *during the past three years*, only during its first year did the campaign receive full funding of \$125 million (U.S., Mar. 2004). Ultimately, because of the reduced funding the Youth Media Campaign had to be significantly reduced in magnitude and scope since its initial implementation in 2002. Not surprisingly, this reduction will affect the extent that VERB will be effective in the future (U.S., Mar. 2004).

Improved Nutrition and Physical Activity (IMPACT) Act (S. 1171 / H.R. 716)

The *Improved Nutrition and Physical Activity (IMPACT) Act* was introduced by a total of eleven Senators on June 3, 2003, amended by the Senate Committee on Health, Education, Labor, and Pensions on October 29, 2003, and passed in the Senate by unanimous consent on December 9, 2003.³ In summary, IMPACT authorizes various government initiatives that will improve nutrition, increase physical activity, and prevent obesity (U.S., Mar. 2004).

First and foremost, as an amendment to the Public Health Service Act, IMPACT includes a training grant program for health profession students to learn of the proper methods for diagnosing, treating and preventing obesity in persons (including children) who are ultimately at risk for serious medical conditions (i.e. heart disease). Secondly, in regards to community-based solutions to increase physical activity and improve nutrition, the IMPACT bill creates a demonstration program that will provide funding to community organizations (including community-based activities, school-based activities, and health care delivery system programs), which are working to curtail obesity and eating disorders through education, outreach and intervention techniques. Thirdly, IMPACT provides additional authority for the CDC to collect and analyze data regarding children's fitness levels and expenditure of energy, as part of the National Health and Nutrition Examination Survey.

Under IMPACT, grants for data collection and analysis for obesity research and health disparities shall also be provided to states, public entities, and nonprofits, and reporting requirements will be established. Overall, the CDC Secretary's task, acting through the National Center for Health Statistics, will be to report on what research has been conducted on obesity

³ The *Improved Nutrition and Physical Activity (IMPACT) Act* was introduced by Senators William Frist, Jeff Bingaman, Chris Dodd, Mike Dewine, Hillary Rodham-Clinton, John Warner, Patty Murray, Richard Lugar, Mary Landrieu, Jeff Sessions, and Lamar Alexander. For a complete summary of the *Improved Nutrition and Physical Activity (IMPACT) Act*, refer to <http://thomas.loc.gov/cgi-bin/bdquery/z?d108:s.01172>:

treatment and prevention, what has been learned, and what future research needs to take place.

Such a requirement will assist in coordinating and compiling obesity research from a number of different agencies and institutes.

Last but not least, the IMPACT bill will allow for states to use preventive health and health service block grants for community education on nutrition and physical activity. In other words, IMPACT adds obesity to the list of purposes for which state block grants can be used (U.S., Mar. 2004).

Food Marketing: Starting Early

In addition to physical activity, the quantity and quality of foods consumed by children is another major factor in the obesity equation. This certainty is why marketing, especially the marketing of food products, deserves close scrutiny by government officials as well as society as a whole.

Consider the most recent statistics:

- ✓ A recent study by the Committee on Public Education (2001) found that America's children spend more time watching television than any other activity, with the exception of sleeping (Nestle, 2003; Brownell & Horgen, 2004); inactive activities (i.e. watching television, surfing the internet, playing video games) account for an average of 38 hours per week for an average child ages twelve to eighteen (Diaz, 1999 in Nestle, 2002).
- ✓ Foehr et al. (1999) reveal that approximately 65% of eight- to eighteen-year-olds and 32% of two- to seven-year-olds have a TV in their bedroom (Brownell & Horgen, 2004).
- ✓ Certain & Kahn (2002) report that 17% of children ages eleven months or younger and 48% of persons ages twelve to twenty-three years old watch more television than recommended by the American Academy of Pediatrics (Brownell & Horgen, 2004)
- ✓ Major networks show between 8.5 and 10.3 minutes of commercials during every one hour program, the average American child seeing 10,000 food commercials each year (one every five minutes during Saturday morning cartoons)(Brownell & Horgen, 2004; Nestle, 2002)
- ✓ The children's television-advertising budget accounted for \$1 billion in 1999, in comparison to \$750 million the previous year (Nestle, 2002); compare this to the National Cancer Institute's \$1 million budget for its 5 A Day fruits and vegetables campaign, or the \$1.5 million for the National Cholesterol Education Campaign of the National Heart, Lung, and Blood Institute (Brownell & Horgen, 2004)

Clearly, both the food industry and its critics would agree that massive amounts of money are spent on food advertising, television remaining the leading “means of persuasion” (Brownell & Horgen, 2004). This is why, when it comes to considering influences of childhood obesity, food marketing, as well as food labeling, should be of special concern. Since 1992, marketing to children by food industries has doubled, and partnerships between food industries and celebrities, as well as television and movie companies (specifically Nickelodeon and the magical world of Disney) have skyrocketed (Brownell & Horgen, 2004; Nestle, 2002). For instance, Britney Spears endorses Pepsi, George can be seen going thru a McDonald’s drive-thru in *George of the Jungle* (1997), and Tinkerbell has made her way onto Kellogg’s cereal boxes (Brownell & Horgen, 2004).

Reasoning behind the use of easily recognizable celebrities, characters and cartoon figures is that they are an easy means to entice children to consume not so much fruits and vegetables, but sugared cereals, soft drinks, fast foods, snack foods loaded with sugar and sodium, and candy (Brownell & Horgen, 2004). As Brownell & Horgen (2004) write, “The hope [of advertisers] is that children will transfer the emotional attachment they feel about a character to a product” (103). Recent studies suggest that the food industries efforts to entice children to want, buy and consume their products is working. As Brownell & Horgen (2004) note, when a sample of eight-year-olds in one experiment were asked ‘Who would you like to take you out for a treat?’ the responses “Tony the Tiger” and “Ronald McDonald” were more popular than the children’s parents (104).

Thus, given the increased power and money investing in food marketing targeted towards children, one can only assume that yes, the “childified” advertising is working. Sadly, for food industries children today are fair game; children are spending increasing amounts of money and

at the same time, rarely distinguish between *programming* and *advertising*. Prior to the age of eight, children generally do not understand that the intent of a commercial is to sell a product (Brownell & Horgen, 2004; Nestle, 2002). Why else would Quaker Oats, in January 2000, begin a \$15 million campaign to promote sales of the heavily sugared Cap'n Crunch cereal to children for a 5-month time period? (Nestle, 2002).

Nonetheless, according to market researchers and critics, the food industry claims that advertising is “only an effective way at moving people towards brands of products they will use anyway” (Brownell & Horgen, 2004). Secondly, food industries justify their advertising to children as a *public service*, meaning they are providing children with a “passport to street wisdom” by educating them in “commercial life” (Nestle 179, 2002). Lastly, and perhaps most shocking, the food industry repeatedly dismisses the fact that, despite their billions of dollars spent on advertising directed at children, this marketing method is ineffective at influencing children’s decisions regarding dietary intake. However, numerous researchers, as well as Federal departments such as the USDA, are quick to disagree. In 1998, the CDC publicly acknowledged the fact that the more television a child watches, the more likely that the same child will consume those foods advertised, and the more likely those foods will be high in calories (U.S., Oct, 1998). Likewise, numerous studies (e.g. Goldberg et al., 1978; Taras et al., 1989; Galst & White, 1996; Coon et al., 2001; Dennison et al., 2001) suggest that a direct correlation exists between poor eating practices and the amount of TV a child watches (Brownell & Horgen, 2004). Dennison et al. (2002) even reports that in preschoolers, the risk of obesity increases by 6% with each additional hour of TV viewed per day (Brownell & Horgen, 2004).

Company	Character	Food

Nickelodeon	Blue's Clues	Nabisco Fruit Treats, Mott's Berry Flavor Applesauce
	Bob the Builder	Brach's Fruit Snacks
	Jimmy Neutron	Quaker Chewy Granola Bars, Quaker Life Cereal, Quaker Cap'n Crunch Cereal, Quaker Cap'n Crunch Peanut Butter Cereal
	Rocket Power	Nabisco Cheese Nips
Disney	Rugrats	Nabisco Fruit Treats, Kraft Macaroni and Cheese, Mott's Fruit Punch Applesauce, Popsicle Cookie Sandwich
	Sponge Bob	Nabisco Fruit Treats, Nabisco Cheese Nips, Saputo String Cheese
	Waldo	Franco American Pasta with Meat Balls
	Beauty & the Beast	Kellogg's Corn Flakes
	Buzz Lightyear	Betty Crocker Fruit Snacks
	Country Bears	Act II Microwave Popcorn
	Disney Princesses	Betty Crocker Fruit Snacks
	Mickey Mouse	Betty Crocker Fruit Snacks
	Mickey Mouse	Disney/Minute Maid 10 percent juice
	Monsters Inc.	Orville Redenbacher's Microwave Popcorn
Tigger	Disney/Minute Maid 20 percent juice	
Winnie the Pooh	Disney/Minute Maid 100 percent juice	
Winnie the Pooh	Betty Crocker Fruit Snacks, Keebler's Rumbly Grahams	
Cartoon Network	Dexter's Laboratory	Kellogg's Pop-Tarts, Kellogg's Apple Jacks
	Johnny Bravo	Keebler Munch'ems, Kellogg's Apple Jacks
	Powerpuff Girls	Keebler Powerpuff Girls Sandwich Cookies, Hunt's Pudding Snack Pack, Edy's Grand Ice Cream
Hanna Brothers	Scooby Doo	Oscar Meyer Lunchables, Betty Crocker Fruit Snacks, Hunt's Pudding Snack Pack, Kraft Macaroni and Cheese, Edy's Grand Ice Cream
Sesame Street Workshop	Bert & Ernie	Apple & Eve 100 percent juice
	Big Bird	Sesame Street Animal Crackers
	Elmo	Sesame Street Cheddar Snack Crackers, Sesame Street 100 percent juice, Apple & Eve 100 percent Juice
Miramax	Spy Kids	Frito-Lay Funyons, Frito-Lay Doritos, Frito-Lay Snack Mix, Tony's Pizza
Public Broadcasting System	Arthur	Juicy Juice 100 percent juice
	Clifford the Dog	Brach's Fruit Snacks, General Mills Kix Cereal
Marvel Characters	Spider-man	Kellogg's Pop Tarts, Kellogg's Corn Pops
Universal Studios	Scorpion King	Reese's Bars
	The Mummy	Reese's Bars
Houghton Mifflin	Curious George	Stop & Shop Fruit Snacks
Warner Brothers	Looney Tunes	Hunts Snack Pack Pudding
Nintendo	Pokemon	Betty Crocker Fruit Rolls
20th Century Fox	Homer Simpson	Kellogg's Corn Pops

Figure 2.2. Television and Movie Characters Used to Promote Food (Brownell & Horgen 108-109, 2004).

Out of the Home and Into the Schools

Television, as well as the internet, is perhaps the most direct and obvious ways for the food industry to market their products to children. Yet it cannot be overlooked that food companies are apt to put their logos on anything they can think of: video games, toys, games, clothing, school supplies, key chains, playing cards, cups... Food companies also sponsor clubs, distribute coupons, and buy product placements in movies, among other marketing means (Nestle, 2002). For instance, Munchkin Bottling company partnered with soft drink companies to have logos such as Mountain Dew and Pepsi placed on baby bottles (of which babies are 4 times as likely to drink soft drinks from)(Brownell & Horgen, 2004). Furthermore, several companies also license counting books from which parents and teachers can teach their young children to read. The Oreo book in particular encourages children to count *and eat* their way through ten Oreo cookies before reaching the book's conclusion 'and now there are none' (Nestle 185, 2002).

Unfortunately, in merely another attempt to increase their profits, the food industry also views America's schools as hosts to considerable marketing opportunity. After all, not all families own TVs and computers, but most of America's children do attend school. Schools in their own right are not necessarily turning their backs on marketing of snack foods and soft drinks within their corridors either. As the gap between rich and poor continues to widen and the proportion of low-income school children continues to increase, the tax base for public schools continues to erode (Nestle, 2002). In order to remain capable of providing basic educational needs, more and more schools are beginning to rely on mechanisms of "school commercialism" in order to stay afloat (e.g. to buy furniture, sound systems, computers, scoreboards, to support student employment, even pay for scholarships)(Nestle, 2002). For instance, school and food

companies have collaborated in regards to placing ads in school newspapers and yearbooks, on school buses, mouse pads, posters, calendars, and book covers (Brownell & Horgen, 2004). Many schools also rely on a la carte foods, convenience stores, vending machines, snack bars, and candy fundraisers—all of which are “stocked overwhelmingly with foods and drinks high in sugar, fat, and calories”—for additional revenue (Brownell & Horgen 131, 2004). Brownell even testified before the U.S. Senate that schools are beginning to look like “7-Elevens with books” (130, 2004). Overall, the two biggest strategies used to push school commercialisms are Channel One and contracts with soft drink companies.

Channel One

Channel One is a fervent advocate of commercialism in schools because this ten-minute news program shows two minutes of commercials, mostly for food, in its daily broadcast to schoolchildren (Brownell & Horgen, 2004; Nestle, 2002). Throughout the United States, 12,000 schools participate in the Channel One program, in which schools receive “free” school-wide television sets and installation hardware, estimated to be a total worth of about \$25,000 (Brownell & Horgen, 2004; Nestle, 2002). In exchange, the private company responsible for Channel One requires that students in 80% of the classrooms watch the Channel One program on 90% of the school days (Nestle, 2002). To get specific, this means that Channel One reaches 12,000 schools, 400,000 educators, and 8.3 million students daily (Brownell & Horgen, 2004). It should be noted that Channel One’s programming is supported entirely by the cost of commercials, about \$175,000 for a thirty-second spot (Brownell & Horgen, 2004; Nestle, 2002). Despite the high price, the food industry remains interested in using Channel One as a marketing mechanism because, as Channel One advertises, ‘Channel One delivers the hardest to reach teen

viewers. Channel One even penetrates the lightest viewers among teens' (Brownell & Horgen 135, 2004).

For school administrators, giving up no more than one hour a week of school time in exchange for \$25,000 worth of video equipment is well worth it. Yet, students are being *required* to watch commercial television as if they are being hypnotized. Also, it is estimated that both Channel One costs taxpayers \$1.8 billion a year, and the two minutes of commercials alone cost \$300 million in lost school time (Brownell & Horgen, 2004). In 1998, the USDA recognized that although Channel One provides schools with “lovely” things that they cannot afford, the programming does include advertising which is “not necessarily in the best interest of children” (U.S. 86, Oct. 1998). However, schools continue to reap the benefits of airing Channel One, rather than subscribing to such services as CNN Newsroom, which, as Brownell & Horgen (2004) note, is free of charge and commercial free.

“Pouring Rights” Contracts

Unfortunately, another major way that school administrators succumb to partnerships with food industry officials, in order to reap financial benefits that “seemingly” outweigh nutritional concerns of students, is by establishing “pouring rights” contracts with soft drink companies (i.e. Pepsi and Coke) (Nestle, 2002). Pouring-rights contracts refer to large sums of payments to school districts, as well as additional payments over a five to ten year period, in exchange for the exclusive sale of a soft drink company’s products in vending machines and during school events (Nestle, 2002). It is estimated that approximately 240 school districts throughout the U.S. have arrangements with soft drink companies, up from 200 in the year 2000 (Brownell & Horgen, 2004; Nestle, 2002). These pouring-rights contracts also include additional stipulations. In order to entice young children, soft drink companies also require those

schools maintaining a pouring-rights contract to advertise to *all* students in the school, meaning on vending machines, cups, brochures, school buildings, and sportswear (Nestle, 2002). With respect to Coca-Cola, such advertising will help the company achieve its strategy of putting a can of Coke within arm's reach of as many people in the world as possible, including children (Nestle, 2002).

For discussion purposes, linking soft drinks and obesity in children is not a very difficult task. A soft drink is made from carbonated water, added sugars (more than nine teaspoons of sugar if considering a twelve-ounce Coke or Pepsi), and artificial flavors (Brownell & Horgen, 2004; Nestle, 2002). The fact that soft drinks are high in calories and low in nutrients justifies classifying soft drinks as “junk food.” Nonetheless, soft drinks are being produced and consumed in vast quantities today, replacing milk children's diets and contributing to calcium deficiencies (Field, 2004; Brownell & Horgen, 2004; Nestle, 2002). Cavadini et al. (2000) report that between 1965 and 1996, adolescents' milk consumption decreased by 36% while soft drink consumption increased by 287% in boys and 244% in girls (Fields, 2004). Likewise, children who consume soft drinks are at a much greater risk of becoming obese because the body has a much harder time compensating for the calories of this liquefied candy, in comparison to calories from solid foods; this finding was reported in a study conducted at Purdue University by DiMeglio & Mattes (2000)(Brownell & Horgen, 2004).

Junk Food Battle Ground: U.S. Federal Government's Struggle to Regulate

In-school sales of soft drinks and other foods of minimal nutritional value is part of a 50-year old saga that began with amendments to the Child Nutrition Act of 1966 (which itself, amending the National School Lunch Act of 1946) (Nestle, 2002). Ever since, such “competitive foods” (e.g. soft drinks) have contributed to the construction of a heated battle ground between

children's health advocates (school food health officials, nutritionists, etc.) and especially soft drink companies (often joined by principals, school boards, and state education departments) (Nestle, 2002). In 1970, Congress passed amendments that allowed for the USDA to block sales of junk foods in school cafeterias during lunch periods, but pressure from school officials (remember, the school district benefits from the sales) and soft drink companies provoked a deregulation of competitive foods to take place (Nestle, 2002). In 1977, during the Carter Administration, Congress gave back to the USDA its regulatory authority under one stipulation: that the USDA would not *ban* foods of minimal nutritional value in schools, but would rather restrict sales. After several attempts, the USDA finally achieved the authority (after soft drink producers finally took the USDA to court in the early 1980s) to prohibit the selling of soft drinks in the cafeteria *only* during meal service periods (Nestle, 2002). This ruling by the Appeals court is referred to as the Competitive Food Service rule.

Thus began, in 1985, attempts by the Federal government to regulate competitive foods, which continue today (Brownell & Horgen, 2004). Alas, following its implementation, the Competitive Food Service rule in 1985 resulted in a stimulation of the sales of soft drinks in schools during *non-mealtime* hours (Nestle, 2002). Furthermore, it became a common tendency for soft drink companies, as well as other food industries, to find loopholes to the Competitive Food Service rule. One common policy of soft drink companies includes making large donations of soft drinks to schools for free distribution to students only during lunch time periods (Nestle, 2002). It was Senator Patrick Leahy (Dem-VT) who said that this particular loophole "is big enough to drive a truck through" and "hurts our children" (Nestle 212, 2002). Similarly, legal loopholes also encourage food service corporations, such as Marriot, to take over school food service operations. Although these management companies are required to provide meals that

meet federal nutrition standards, it seems that a common tendency of such food service corporations is to sacrifice nutritional quality for profit. Hence, the adoption of food courts (Brownell & Horgen, 2004).

Although recent evidence suggests that some schools are beginning to pay closer to what students are consuming during the day while on school premises, the considerable breaking of Federal rules regarding sales of junk foods in schools remain considerable (Silverman, 2004; Nestle, 2002). Some schools are switching to water and sports drinks in their vending machines. The state of Texas even went so far as to place a national ban on selling candy and soda in its elementary schools. Yet, these efforts as well as Federal law have proven thus far to be largely ineffective considering the continuing rising rate of childhood obesity (Silverman, 2004). Stronger Federal guidelines are needed, according to Margo Wootan, Director of Nutrition Policy for the Center for Science in the Public Interest (Silverman, 2004).

***Addressing Food Marketing & Labeling: Prevention of Childhood Obesity Act
(S. 2894 / H.R. 2227)***

Recently, a 19-member committee assembled by the National Academy of Sciences' Institute of Medicine made a large cry for a national campaign to counter childhood obesity by parents, schools, food companies, and local, state and federal governments (Stein, 2004). Although the committee is itself unable to implement any of its recommendations, its report can have a powerful influence in the U.S. public policy arena, as it did for Senator Edward Kennedy (D-Mass) (Stein, 2004). Senator Kennedy immediately proposed a bill in early October 2004 that would address and go beyond the committee's recommendations (Stein, 2004; Ban, 2004).⁴

In summary, the most significant provisions of the *Prevention of Childhood Obesity Act* include (Ban, 2004):

⁴ For a short summary of the proposed *Prevention of Childhood Obesity Act*, refer to <http://www.commercialalert.org/pcoasum.pdf>. For a full summary of the *Prevention of Childhood Obesity Act*, refer to <http://www.commercialalert.org/pcoa.pdf>.

(1) Requiring schools that receive Federal funds to establish policies to ban the sales of soft drinks and other foods of minimal nutritional value (e.g. candy) in vending machines on school premises and at all school events

(2) Providing grants to school districts so that they are able to provide daily physical education to all students, provide food options low in fat calories and added sugars (e.g. fruits, vegetables, whole grains), educate students about the health benefits of good nutrition and physical activity, encourage the consumption of water by maintaining a minimal number of water fountains, develop early childhood obesity prevention programs, among other activities

(3) Establishing a Federal Leadership Commission within the CDC that would, among other tasks, convene a *national summit* to implement food advertising and marketing guidelines based on findings from the Institute of Medicine

(4) Authorizing the Federal Trade Commission (FTC) to enforce and monitor media compliance with the guidelines established by the National Summit.

It should be noted that Senator Kennedy's *Prevention of Childhood Obesity Act* corresponds with Senator Joe Lieberman's (D-CT) "junk food" proposal with which he attempted to make food advertising to children a topic in the presidential race of 2004. Overall, Lieberman contended (Senator Kennedy would most likely agree) that the current administration under President George W. Bush has done very little to both provide consumers with more useful information on food products and stop corporations from "preying" on children (Perlman, 2003). Although it is obvious that Senator Lieberman was unsuccessful in the agenda setting realm of the presidential race, reasoning as to why his "junk food" proposal was set on, to be cliché, the backburner, only to be picked up by Senator Kennedy is unknown (and beyond the scope of this paper).

Nevertheless, the mere fact that Senator Kennedy is proposing to launch even Lieberman's notion of FTC intervention is of most importance, as discussed below.

Today, the American Psychological Association continues to uphold the notion that Federal regulations should further restrict television advertising to children eight years of age and younger because "research shows youngsters lack the skills to question a commercial's

claims as anything but fact” (Mayer, 2004). The Federal Communications Commission (FCC) already limits children’s commercials on television to 10.5 minutes per hour on weekends and 12 minutes per hour during the week. The American Psychological Association proposes that commercials targeting children eight years old and under should face a tighter limit of minutes, or be banned altogether (Mayer, 2004). The latter recommendation was proposed by the FTC in 1978 although the concern of the time was tooth cavities, not so much obesity (Mayer, 2004; Muris, 2004).

Surprisingly, the FTC’s attempt to ban food marketing to children more than 25 years ago resulted in Congress not only refusing such a regulation to exist, but labeling the FTC as ‘the national nanny” (Mayer, 2004). Congress also temporarily halted all funding to the FTC, and passed a law barring the FTC from implementing any comparable rule in the future (Mayer, 2004). Therefore, the only power that the FTC possesses today, in regards to regulating television commercials to children, is the ability to challenge ads on a case-by-case basis (very costly and time-consuming). The FTC can also provide reports in attempt to influence the public policy agenda (Mayer, 2004).

Again, the *Prevention of Childhood Obesity Act* is, in part, significant because it would provide the FTC with the authority once again to enforce and monitor media compliance with the guidelines established by the Act’s *National Summit to Implement Food and Physical Activity Advertising and Marketing Guidelines to Prevent Childhood Obesity* (Ban, 2004). However, such a fix would surely be met with resistance both within the FTC, as well as from the television and food industry. For instance, one editorial in *Television Week* claims that the government’s role is merely to provide education and valuable tools, such as television ratings, while also allowing for the free market “to do its job” (Light, 2004). Likewise, Timothy Muris,

chairman of the FTC, claims that attacking food advertising during children programming would be illegal as well as ineffective because, according to him, there is no reason to believe that the ads children are viewing are making them obese (Muris, 2004). In one article, Muris is reporting as even stating, “Even our dogs and cats are fat, and it is not because they are watching too much advertising” (Muris A10, 2004). Rather, the FTC will, as Muris claims, work to ensure that commercials are not misleading, as well as urge food manufacturers to develop and promote healthy foods to children that are tasty, fun and healthy. (Muris, 2004).

Interestingly, when CDC representative Dr. William Dietz was asked in 1998 whether or not it would prove beneficial for the government to mandate counter-advertising (advertising that would ultimately promote healthy foods) during children’s programming, Dietz explained that additional government regulation would probably not make a difference in this area. Two reasons for Dietz’s belief include inadequate funding for such a counter-advertising campaign, as well as the presence of more important (according to Dietz’s beliefs) alternative strategies, such as making physical activity a more available, safer and appealing endeavor (U.S., Oct. 1998). If not counter-advertising then, what else can the government do to help tackle the childhood obesity epidemic?

As suggested earlier, the Federal government has the obligation to inform the American public of clear and accurate information that is pertinent to the food and beverages that people consume. No other item serves this purpose better than nutrition labels. Currently, the USDA’s Food & Nutrition Service (FNS) supports the Child Nutrition (CN) Labeling Program, which is defined as a voluntary labeling program by the Federal government for Child Nutrition Programs, such as the National School Lunch Program (U.S., CN labeling). Note that the CN Labeling Program is *voluntary*, which means that if commercial food manufacturers are

interested, the FNS will evaluate their product in order to determine its contribution toward meal pattern requirements. If approved, the food manufacturer may then purchase a CN label for their product; the CN labels clearly identify the product's contribution toward meal pattern requirements, as well as prevent schools from exaggerating the nutrition of the food product (U.S., CN labeling).

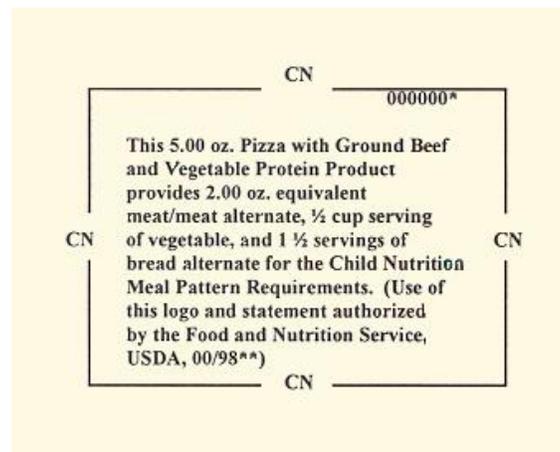


Figure 2.3. A CN label. Products eligible for the CN Labeling Program include: (1) main dish products which contribute to the meat/meat alternative component of the meal pattern requirements (e.g. beef patties, cheese or meat pizzas, meat, cheese or bean burritos, egg rolls, breaded fish portions), and (2) juice and juice drinks containing at least 50% real fruit juice (includes juice bars) (U.S., CN labeling).

The purpose of CN labels is not to guarantee that CN-labeled foods are safer to eat. However, and on a more positive note, the labels still provide a beneficial way for students, as well as school administration and parents, to assess the extent that foods are nutritional (U.S., CN labeling). Is this added benefit reason enough for the Federal government to *require* CN labeling? Why is CN labeling not required?

The World Health Organization's (WHO) Global Strategy on Diet, Physical Activity, and Health offers one hypothesis in regards to the latter inquiry. Made up of more than sixty American and European consumer advocacy organizations, the WHO Global Strategy coalition

urges governments to change school foods, improve food labeling and mass education, and establish limits on food advertising and marketing targeting children (Joint, 2004). Overall, the WHO coalition contends that the U.S. is more concerned with satisfying the wants of large food companies, rather than supporting “serious proposals to combat obesity” (Joint, 2004). (Perhaps the coalition is so resentful towards the U.S. because it is facing strong opposition from this nation, in comparison to the vast support received from nearly all members of the European Union). Nonetheless, according to the WHO, the U.S. emphasizes the *individual* rather than *government intervention* as primary means to combat obesity because it remains focused on pleasing interests of the food industry (Joint, 2004).

U.S. Government contributing to Obesity Epidemic?

WHO’s belief that the U.S. is highly concerned with meeting the needs and desires of farmers and food producers is worth exploring, due to the mere fact that there exists vast evidence which suggests that this is very true. In order to justify such a claim, however, a brief history of the relationship between the Federal government and food producers must first be explored.

Since the 1920s, American farmers have benefited from an assortment of federal subsidies and support programs meant (1) to stabilize crop prices, (2) keep farmers farming, and (3) provide families with an affordable and reliable source of food (Fields, 2004). Over the years, American farm subsidies have transformed from an emergency initiative into an indestructible institution, as described by Scott Fields in his “The Fat of the Land” (2004). The most highly subsidized crops today are wheat, soybeans, and especially corn; products made from these crops—such as high-fructose corn syrup (sweeteners) and hydrogenated fats—exist in large quantities and are an inexpensive means to making fattening and over-sweetened

prepackaged snacks, ready-to-eat meals, fast foods, and soft drinks not only taste good, but cheap in price (Fields, 2004). Thus, it is subsidies, as well as food producers' notorious ability to influence U.S. public policy that is encouraging obesity "at the expense of sound nutritional practices" (Fields A 820, 2004).

Since the end of World War II, farmers and food producers have come to view the USDA as *their* department, and this outlook remains very much alive today (Nestle, 2002). As stated by Secretary of Agriculture, Glickman, during the 1998 *Childhood Obesity: Causes & Prevention Symposium*, "Yes, we are the department of America's farmers and ranchers. But we are also America's food and nutrition department—fighting hunger and promoting healthy eating and healthy lives (U.S. 63, Oct. 1998). Are the interests of the USDA *really* to promote healthy lifestyles for the American public, particularly for children?"

Marion Nestle in his Food Politics: How the Food Industry Influences Nutrition and Health, claims that food producers and the USDA are so strongly united that "any federal policy related to land use, commodity distribution, or prices would promote the interests of the food producers" (98, 2002). It should be noted that, according to Nestle, this systematic relationship did break down at least to some extent around the late 1960s and early 70s, due to the fact that new constituencies began demanding influence over agriculture politics (e.g. consumers complaining about an agreement by the government to sell millions of bushels of grain to the Soviet Union, which caused a national shortages and price increase) (Fields, 2004; Nestle, 2002). Nevertheless, food producers today seemingly continue to influence federal decisions regarding every aspect of food and beverage production. The two primary strategies they use to gain access to federal officials are: (1) the transfer of funds from lobbyists to federal officials in the form of "federally-sanctioned" (permissible) donations, referred to as "hard" money, and legal

but unsanctioned “soft money” (i.e. gifts), and (2) frequent job exchanges between lobbyists and federal officials, which is commonly referred to as the “revolving door” (Nestle 99, 2002). The latter is particularly prevalent between lobbyists and the USDA, as illustrated in 2001 with the changing government administration. The former Secretary of Agriculture, Glickman, went to work for a law firm that lobbies for agriculture and food companies, while the new Secretary of Agriculture, Ann Veneman, has been appointed as a lobbyist for the National Cattlemen’s Beef Association (Nestle, 2002).

Perhaps two of the biggest examples that illustrate food producers ability to have corporate influence over government decisions pertain to the 2002 Farm Act and a 1994 attempt by the USDA (required by Congress) to bring school meals in compliance with the *Dietary Guidelines*. First, the 2002 Farm Act abandoned the government’s initial 1996 attempt to eliminate crop subsidies through the Freedom to Farm Act (Fields, 2004). The Freedom to Farm Act, rather than subsidies, was instead to provide farmers with fixed payments that varied depending on how much the individual farmer had grown in previous years. Nonetheless, the 2002 Farm Act seemingly relieved the Freedom to Farm Act of its objective by calling for about \$900 billion to be distributed to farmers by the year 2012, which is a \$72 billion *increase* in comparison to the programs that were replaced (Fields, 2004). While some supporters call this increase in payments a safety net for America’s farmers, critics call it “welfare that benefits huge agricultural corporations—giant farms, grain brokers, food processors, fast-food chains, and prepackaged food companies—more than family farms” (Fields A 820, 2004).

Secondly, it was in 1994 when Congress required the USDA to propose new rules that would reduce the amounts of fat and sugar in school meals (Nestle, 2002). This proposal would mean that schools would ultimately purchase smaller amounts of meat, cheese, and frying

potatoes, while increasing their supply of poultry, fruit, and vegetables. As expected, food producers, in risk of losing market share, opposed such an initiative, remaining unconcerned with the initiative's potential to improve nutrition in school lunches (Nestle, 2002). Despite the opposition faced from food producers, as well as school food service groups who claimed the change would be too difficult to fund, the USDA enacted such a proposal anyhow. Remarkably, however, the department then immediately amended the proposals in order to grant large concessions to the food industry (Nestle, 2002). For another example, although 50% of children's fat intake comes from whole milk and former rules of the USDA require whole milk to be served in school meals, the department remained unable to alter this; immense resistance from the dairy industry proved too strong a pressure force (Nestle, 2002). Such resistance explains why the price gap between foods high in sugar and fats compared to fruits and vegetables is so "artificially large" (according to 2001 USDA figures, the department spent \$350 million on surplus beef and cheese for schools, compared to \$161 million for fruits and vegetables) (Fields A820, 2004; Yeoman, 2003). Needless to say, school meal programs, as well as the consequent increasing weight of this nation's children, reflect this disparity.

Double-Edged Sword: Fatty Subsidies vs. Healthy School Meals

Presumably, it boggles the minds of nutritionalists, parents, and school administration alike that children should be expected to make individual *healthy* decisions regarding what they consume, when the federal government lures them with beef products and whole milk, rather than fruits and vegetables. Likewise, how can government officials expect USDA initiatives for healthier lifestyles to be effective when other activities, such as providing subsidies, are achieving just the opposite? Contemplating such issues, numerous nutrition experts wonder why the USDA has the authority to set federal nutritional policies at all (Stein, 2004). Brownell

recommends that the power to set such federal nutritional policies should be taken from the USDA and given to the CDC (Stein, 2004). However, it cannot be overlooked that recent actions by the USDA might suggest that health and fitness, particularly of children, are increasingly becoming one of USDA's major priorities (U.S., Sept. 2004).

***Child Nutrition and Women, Infants, and Children Reauthorization Act
(P. L. 108-265)***

The \$16 billion *Child Nutrition and Women, Infants, and Children Reauthorization Act*, which includes the National School Lunch Program, School Breakfast Program, Summer Food Service Program, Special Milk Program, and the Special Supplement Nutrition Program for Women, Infants, and Children, was signed on June 30, 2004 after receiving support from the both the House and Senate (Davis, 2004). Collectively, the law offers a new focus on healthy eating habits and fighting obesity (Davis, 2004). Although it would prove mind-numbing to describe all of the amendments to the previous listed programs, the primary changes of the law are as follows (Davis, 2004):⁵

- ✓ Expansion of a 'farm to cafeteria' grant program, in order to encourage school districts to locate and use locally produced food
- ✓ A requirement that both states and school districts develop and implement "wellness" policies that will promote greater physical activity and nutrition among children by the year 2006; the departments of Agriculture, Education, and Health and Human Services are to provide assistance when requested
- ✓ Extension of a paperwork-reduction pilot project in the Summer Food Service Program that will include private, nonprofit sponsors in thirteen states, in addition to the previously included public sponsors of seven states
- ✓ A more streamlined application process for free and reduced-price school lunches for low-income families, calling for eligibility to extend year-round, electronic filing by parents/guardians, and a single application for multiple children of the same family
- ✓ Expansion of the Fruit and Vegetable Pilot Program (FVPP) (provides fresh product to students for snacking) to now include eight states and three American Indian reservations

⁵ For additional information regarding the National School Lunch Program, School Breakfast Program, Summer Food Service Program, Special Milk Program, Special Supplement Nutrition Program for Women, Infants, and Children, as well as the Child and Adult Care Food Program, refer to <http://www.fns.usda.gov/fns/>.

Overall, the *Child Nutrition and Women, Infants, and Children Reauthorization Act* expands several existing pilot programs, while creating new ones whose purpose are to focus on wholesome nutrition and children's wellness (Davis, 2004). Specifically, note the latter two of the law's changes. The extent in which this law will impact school meals, as well as the fruits and vegetables program, should be examined; it is changes to these two programs that will perhaps prove the biggest burden or benefit to the fight against childhood obesity.

Established in 1946 by President Harry Truman, the National School Lunch Program (NSLP) is defined as "a federally assisted meal program operating in more than 99,000 public and private schools and residential day-care institutions" (Brownell & Horgen 132, 2004). Currently, 29 million children receive free or reduced-priced school lunches through the program (Brownell & Horgen, 2004; U.S., Sept. 2004). In order to participate, schools must meet federal lunch requirements (the meals must meet the pertinent recommendations of the *Dietary Guidelines for Americans*) as well as provide free or subsidized lunches to children of low-income families (U.S., School Lunch Program). For every meal they serve, schools receive cash subsidizes and commodities from the USDA (Brownell & Horgen, 2004).

The irony of surrounding the NSLP is considerable. Initially, the NSLP was created in order to address growing malnutrition among children of low-income families whose learning was consequently being impeded (Brownell & Horgen, 2004). However, over the years, the NSLP became itself a catalyst for the astonishing increase in calorie consumption among children (from malnutrition to "misnutrition"). Reason for this change is easy to pinpoint; the NSLP, as a commodities program, was designed with a dual and conflicting purpose. On one side, the objective of the NSLP is to provide "healthy" meals at low or zero cost to students of public schools. On the other side, the NSLP, acting as an agricultural subsidy program, provides

a guaranteed market for the agricultural industry (Brownell & Horgen, 2004; Yeoman, 2003). Remember that those crops most highly subsidized today are wheat, soybeans, and especially corn, which lead to cheaper products high in sweeteners (high-fructose corn syrup) and fats (Fields, 2004). Thus, the NSLP provides for the same type foods high in sweeteners and fat in schools that the USDA, who also administers the program, encourages schools to reduce (Brownell & Horgen, 2004).

There is question as to whether or not amendments to the NSLP will prove beneficial or detrimental to obesity-prevention and child wellness efforts. The *Nutrition and Women, Infants, and Children Reauthorization Act* attempts to both encourage fruit and vegetable intake among students and improve low-income families' access to school meals (U.S., Sept. 2004).

Regarding the former, the act might do just the opposite. The current administration set out to ensure that those children receiving free and reduced-price lunches are truly coming from families of low income, meaning an income of about \$24,505 for free eligibility, and \$34,873 for reduced price) (Davis, 2004; Toppo, 2003). It should be noted that after-school snacks (i.e. fruits and vegetables) are provided to students on the same income eligibility basis. (U.S., School Lunch Program). Therefore, one change to the NSLP is the requirement that schools *must* annually audit, or rather request proof of income, of three percent of students whose family income hovers close to the cutoff line for free and reduced-price meals (Davis, 2004).

Previously, school districts verified those students that qualified for lunch aid by relying on parents to report their incomes, although school districts generally did not require proof (Davis, 2004). Concerned over the new requirement for verifying, many education groups fear that tightening up inspection of the NSLP applications in forcing parents/guardians to *prove* their income might turn many parents away in fear that they are not eligible (Davis, 2004; Toppo,

2003). Such an outcome would result in many children being dropped from the NSLP who truly are eligible and in fact rely on such nourishment (Davis, 2004; Toppo, 2003).

In attempt to curb childhood obesity and rid students of junk food eating habits, the government has increased its purchase of fruits and vegetables through the NSLP (Gersema, 2003). For instance, in 2003, the USDA purchased more than 973 million pounds of fruits and vegetables (most canned or frozen) for schools, which is 38% more than in the year 1999. (Gersema, 2003). The Fruit and Vegetable Pilot Program (FVPP), established through the previously mentioned 2002 Farm Act authorized \$6 million for the USDA to provide fresh and dried fruits and vegetables free to students in 107 elementary and secondary schools (in 2003) (U.S., May 2003). Fruits and vegetables are provided through pilot funds, allocated to schools based on enrollment. Encouragingly, participating schools thus far have reported that the FVPP has been successful in reducing students' consumption of less healthy food and increased students' awareness and preference for fruits and vegetables (U.S., May 2003). For instance, quantitative data on the effects of the FVPP, although limited, suggest that with the presence of the FVPP in schools, the value of total cafeteria a la carte foods and beverages fell by 3 percent (U.S., May 2003).⁶

Although most participating schools of the FVPP voiced strong beliefs that this program, or one similar to it, should continue, it cannot be overlooked that operation of the FVPP does not come without dilemma (U.S., May 2003). First and foremost, the government's increased purchases in fruits and vegetables are being met with resistance from those food producers who are interested in obtaining a larger share of the school lunch budget (Gersema, 2003). Emily Gersema of the Washington Post describes such struggle in writing:

⁶ For additional information regarding evaluation and effectiveness of the USDA Fruit and Vegetable Pilot Program, refer to <http://www.ers.usda.gov/publications/efan03006/>.

The milk industry is lobbying to get more milk to children. Butter processors want their product put back in the program. Wheat processors are seeking a special project encouraging children to eat more bread. Soy processors say soy milk should be offered as an alternative to milk from cows. (A. 19, 2003).

Needless to say, it can only be hoped that the lobbying history of the food industry will not precede itself in managing to persuade Congress and USDA department officials to relinquish a portion of their current fruits and vegetables purchasing power.

Another challenge in continuing the FVPP is, not surprisingly, funding. Of the 105 schools reporting during the 2002-2003 school year, 100 of them claimed that continuing the FVPP would not be feasible without continued federal funding (U.S., May 2003). Nationwide expansion of the fruits and vegetables program, comparable to this pilot program, would cost approximately \$4.5 billion, based on an average of 48.2 million children in public schools (in 2001). This cost estimate would be higher if public schools were also to participate (U.S., May 2003). This cost does not include nutrition education and project promotion, which were not mandatory components of the FVPP (U.S., May 2003). Whether the government would be willing to fund such an initiative, despite its clear benefits on students' health, is unclear. One fact is for certain, however. If funding for the fruits and vegetables program is cut by the government, the program's effectiveness will surely diminish and the program itself will be at risk of collapse. Perhaps no other obesity prevention initiative exemplifies this consequence more than *Team Nutrition*.

Team Nutrition

Developed by the USDA, Team Nutrition can be described as an integrated, comprehensive plan for improving children's eating and physical activity habits. Well, kind of.

Overall, the purpose of Team Nutrition is to promote and apply the principles of the *Dietary Guidelines for Americans* and the Food Guide Pyramid through the following three main “behavior-oriented strategies” (U.S., Team Nutrition):

- (1) Providing training and technical assistance for Child Nutrition foodservice professionals to help them serve meals that look good, taste good, and meet nutrition standards.
- (2) Providing multifaceted, integrated nutrition education for children and their parents. This education will build skills and motivation for children to make healthy food and physical activity choices as part of a healthy lifestyle.
- (3) Providing support for healthy eating and physical activity by involving school administrators and other school and community partners.

Furthermore, Team Nutrition is designed to utilize six communication channels, which include: foodservice initiatives, classroom activities, school-wide events, home activities, community programs and events, and media events and coverage (U.S., Team Nutrition). It is through these six main channels of communication from which children, as well as their caretakers and school administration, are to be educated of the importance of healthy eating. However, due to funding cuts by Congress, it remains disputable whether or not Team Nutrition can even accomplish such an education feat today due to lack of resources. During the *Childhood Obesity: Causes & Prevention Symposium*, Glickman, Secretary of Agriculture, described the dismal future outlook of Team Nutrition efforts, as well as issue of childhood obesity as a whole. He explained:

In the past, we’ve also had nutrition education and training grants which worked hand-in-hand with Team Nutrition providing funds to teach the teachers about nutrition. Unfortunately, Congressional leaders didn’t see the value of this effort. This Administration asked for \$10 million. We got not a single dollar. U.S. businesses spend an estimated \$30 billion a year promoting their food products, regardless of the role they play in a balanced diet, and we cannot get \$10 million

to teach kids how to navigate all these choices and enjoy foods in healthy proportions. That tells me that we have a long ways to go to overcome the dangerous disregard for this problem that is still out there. (U.S. 64, Oct. 1998).

Significantly, in his statement, Glickman pinpoints a major obstacle that departments, organizations and individuals alike, in their efforts to tackle childhood obesity, must continue to overcome today. The fact is our nation's current Federal government is collectively failing at providing the support needed to adequately address the *battle of the bulge*. How can the Federal government expect to make sufficient progress when their childhood obesity initiatives are met head-on with government practices, such as fatty subsidies, that produce the very disease that the government is apparently working to get rid of? To put it bluntly, the heart of the Federal government remains largely detached from the national struggle against childhood obesity. Is this because the Federal government's interests lie elsewhere? Most likely so. But Forget half-hearted efforts. Forget the probable attempts by the Federal government to persuade the American public that it actually *wants* to address the rising rate of childhood obesity. Before the introduction of any more initiatives, the Federal government truly needs to assess and determine an answer to the following question, and then stick to its agreement : What priority are we committed to giving to the American children?

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