

Obesity on the Menu:

Reducing the Promotion of Sugar Sweetened Beverages through Restaurant Children's Menus

Eating out used to be a special treat, but these days families are increasingly eating meals from restaurants. 25% of children's calories come from fast-food and other restaurants.¹ This trend is of public health concern because consumption of restaurant food is associated with increased caloric intake and poorer diets.²

The vast majority of kids' meals include calorie-dense, nutritionally-poor foods.

- 86% of children's meals at the nation's largest chain restaurants are high in calories; many also are high in sodium (66%) and saturated fat (55%).³
- French fries are the most common kids' meal side option, and over three-quarters of the top restaurant chains promote sugar drinks through kids' menus.⁴

Despite the health risks associated with sugar drink consumption, the majority of top restaurant chains feature sugar drinks with kids' meals. With one in three children overweight or obese, sugar drinks should not be promoted through restaurant meals for young children.

- Soda, juice drinks, sports drinks, and other sugar drinks are the largest source of calories in children's diets, providing nearly half of children's sugar intake.⁵
- A study conducted by the Harvard School of Public Health found that for each additional serving of soda or juice drink a child consumes per day, the child's chance of becoming overweight increases by 60%.⁶



- Consumption of sugar drinks can displace healthier foods in children's diets, like low-fat milk, which, unlike sugar drinks, provide key nutrients including protein, calcium, potassium, magnesium, vitamin D, and vitamin A.⁷
- A study conducted by Tufts University Schools of Nutrition Science and Dental Medicine found that for each additional 4 oz increase in sugar drink consumption per day, a child's chances of having severe early childhood dental caries increases by 14%. Each additional 8 oz serving increases the chances of having severe early childhood caries by 139%.⁸

Fast-food companies target children and adolescents with \$714 million worth of marketing each year, promoting products, brands, and toy premiums to kids as young as 2 years old.⁹ Restaurants market to children in schools, on television, on the Internet, and in their restaurants, among other places. They use marketing to shape children's food preferences and choices, including by shaping what kids think of as food. Studies show that repeated exposure to fast food and soda, through advertising, marketing, and consumption, cultivates a pattern for future consumption and a preference for those and similar foods.¹⁰

Support Parents, Protect Kids

Restaurants undermine parents' ability to feed their children healthfully when they directly market unhealthy food choices to children. Restaurants should work with parents, not against them.

Restaurants have made some progress improving children's meals, but progress has been modest and slow. Between 2008 and 2012, the percentage of restaurant children's meals meeting nutrition standards increased from 1% to just 3%.³ Thus, states and localities need to nudge restaurants to do better. Improving the nutritional quality of restaurant children's meals is a shared responsibility that should involve states, localities, restaurants, and parents.



Several fast-food restaurants have taken the positive step of featuring only healthy beverages with children's meals. In 2013, McDonald's announced it will no longer list soda as an option for its Happy Meals, joining Subway, Chipotle, Arby's and Panera, which also have removed sugar drinks from their kids' menus.

Subway's Fresh Fit for Kids Meals offer low-fat or fat-free milk or water as the default

Given the sky-high rates of childhood obesity, states and localities can support parents in helping children make healthy food choices by ensuring restaurants only offer healthy beverages with restaurant children's meals.

Municipalities generally have the authority to regulate commercial products and practices to protect the public's health, safety, and general welfare. Addressing restaurant children's meals is a basic exercise of that authority. **Parents have the right to guide their children's food choices without so much interference from big food corporations.**

For more information, contact Kate Klimczak at the Center for Science in the Public Interest: kklimczak@cspinet.org or (202) 777 - 8329.

¹ Lin B. and Morrison R.M. (2012). Food and Nutrient Intake Data: Taking a Look at the Nutritional Quality of Foods Eaten at Home and Away From Home. *Amber Waves*. 10(2):1-2.

² Powell L.M. and Nguyen B.T. (2012). Fast-food and Full-Service Restaurant Consumption among Children and Adolescents: Effect on Energy, Beverage, and Nutrient Intake. *Arch Pediatr Adolesc Med*. November 5.

³ Center for Science in the Public Interest (CSPI). *Kids' Meals II: Obesity on the Menu*. Washington, D.C.: CSPI, 2013.

⁴ Yale Rudd Center for Food Policy and Obesity. *Fast Food F.A.C.T.S.* New Haven, CT: Rudd Center, 2013.

⁵ U.S. Department of Agriculture and U.S. Department of Health and Human Services. *Dietary Guidelines for Americans, 2010*. 7th Edition, Washington, DC: U.S. Government Printing Office.

⁶ Ludwig DS, et al. "Relation between Consumption of Sugar-Sweetened Drinks and Childhood Obesity: A Prospective, Observational Analysis." *Lancet* 2001, vol. 357, pp. 505-508.

⁷ Lasater G, Piernas C. and Popkin BM. (2011). Beverage Patterns and trends among school-aged children in the U.S., 1989-2008. *Nutr J*. 2011;10:103.

⁸ Evans EW, Hayes C, Palmer CA, Bermudez OI, Cohen SA, Must A. Dietary intake and severe early childhood caries in low-income, young children. *J Acad Nutr Diet*. 2013 Aug;113(8):1057-61

⁹ Federal Trade Commission [FTC] (2012). *A Review of Food Marketing to Children and Adolescents. Follow Up Report*.

¹⁰ Cornwell T, McAlister A. (2011) Alternative Thinking about Starting Points of Obesity. Development of Child Taste Preferences. *Appetite*, vol. 56, pp. 428-439.