

For the majority of Americans who do not use tobacco, the most important behaviors to reduce cancer risk are maintaining a healthy weight, making healthy dietary choices, participating in regular physical activity, and limiting alcohol consumption.<sup>1</sup> There is increasing evidence that exposure to excess body fat over the course of a lifetime, beginning in childhood, has adverse health consequences.<sup>2</sup> What children eat today affects their future cancer risks.

For many families with busy schedules, dining out has become a part of their routines. Meals promoted in restaurants as kids' meals are usually packaged to appeal to young children and include smaller portions of an adult entrée, at least one side dish, and often a dessert. Many meals marketed to kids still come with sugary drinks which add calories without adding nutrients. They may also include a toy or some other incentive to increase the child's desire for the meal.<sup>3</sup>

Foods eaten in restaurants are higher in calories, saturated fat, and sodium while being lower in nutrients than foods eaten at home.<sup>4,5</sup> Fast food, in particular, is generally served in large portions for low prices and is associated with overeating and weight gain.<sup>6</sup> Not only is this food less nutritious, but food preferences established early in life often persist into adulthood.<sup>7</sup>

## Fast Food and Kids

In a 2016 survey, 91% of parents surveyed reported buying food for their children from either McDonald's, Burger King, Wendy's or Subway in the past week.<sup>8</sup> Parents are clearly increasing their purchases of fast food: in 2013, 83% of parents reported taking their children for fast food while 79% did in 2010.<sup>9</sup> Restaurant foods and beverages are second only to grocery stores as the source of calories for youth ages 4-11.<sup>10</sup> Each day, more than one-third of children and teens consume fast food.<sup>11</sup>

## Marketing and Kids' Food Choices

Unhealthy food marketing to youth has been shown to be a major contributor to poor diet choices.<sup>12</sup> Chain restaurants spend hundreds of millions of dollars in marketing, including marketing targeted directly to children and teens.<sup>13</sup> Older youth are often bombarded many times a day with advertising through social media, gaming platforms, television, and sporting event sponsorships.<sup>14</sup> Low-income neighborhoods are more likely to have fast food restaurants, which increases easy access to unhealthy foods, as well as exposure to window and "point-of-sale" advertising.<sup>15</sup> Targeted marketing of unhealthy foods to communities who already experience a disproportionate number of nutrition related illnesses, such as low income or communities of color, creates an additional barrier to healthy eating and further contributes to health disparities.

## Health Impact of Dining Out

Studies have repeatedly shown that frequent fast-food consumption is related to increased calorie consumption and increases the risk of obesity.<sup>16</sup> Additionally, students who had fast-food restaurants within a half-mile of their school were more likely to be overweight, consume more sodas, and eat fewer fruits and vegetables.<sup>17</sup>

Approximately 18 percent of all cancers are caused by the combination of poor diet, physical inactivity, excess bodyweight, and excess alcohol consumption.<sup>18</sup> Excess body weight has been identified as a risk factor for 13 different cancers.<sup>19</sup> Obesity rates have tripled among children in recent decades, with 35% of youth, ages 2-19, now overweight or obese.<sup>20</sup> Overweight and obesity can negatively impact youth, both physically and psychologically, and excess body weight is associated with poor academic achievement and a decreased quality of life.<sup>21</sup> Moreover, children who are overweight or obese are less likely to attain or maintain a healthy weight in adulthood.<sup>22</sup>

## Policy Strategies for Healthier Kids' Meals

For some, dining out is an enjoyable family activity, while for others it is a necessity between children's activities and homework. Dining out should not mean having to select an unhealthy meal. Exposure to a variety of healthy foods is part of establishing healthy lifetime eating habits.<sup>23</sup>

The American Cancer Society Cancer Action Network (ACS CAN) advocates for policies that lead to healthy eating and active living and policies that provide consumers with clear, useful information that supports healthy lifestyle choices.<sup>24</sup> ACS CAN promotes making the healthy choice the easy choice and supports improving the nutritional quality for food and beverage options in restaurants, particularly for children's meals. ACS CAN supports healthy default options for kids' meals by requiring that milk or water, instead of sodas, be offered as the default beverages. These policies may also require that fruit, vegetables, or yogurt be offered as sides instead of French fries or desserts.

For more information on ACS CAN's advocacy work around healthy eating and active living environments, please visit <https://www.fightcancer.org/what-we-do/healthy-eating-and-active-living>.

<sup>1</sup> American Cancer Society. (2019) *Cancer Facts and Figures, 2019*. Atlanta, GA: American Cancer Society

<sup>2</sup> American Cancer Society. (2019) *Cancer Facts and Figures, 2019*. Atlanta, GA: American Cancer Society

<sup>3</sup> Lee-Kwan, S.H., Park, S., Maynard, L., Blanck, H.M., McGuire, L.C., Collins, J. (2016). Parental characteristics and reasons associated with purchasing kids' meals for their children. *American Journal of Health Promotion*. 32(2), 264-270. doi: 10.1177/0890117116683797

<sup>4</sup> Lin, B., 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*. United States Department of Agriculture Economic Research Service. Retrieved from <https://www.ers.usda.gov/amber-waves/2012/june/data-feature-food-and-nutrient-intake-data/>

<sup>5</sup> Moran, A.J., Block, J.P., Goshev, S.G., Bleich, S.N., Roberto, C.A. (2017). Trends in nutrient content of children's menu items in U.S. chain restaurants. *American Journal of Preventive Medicine*. 52(3), 284-291. doi: 10.1016/j.amepre.2016.11.007

<sup>6</sup> Larson, N., Neumark-Sztainer, D., Laska, M.N., Story, M. (2011). Young adults and eating away from home: associations with dietary intake patterns and weight status differ by choice of restaurant. *Journal of the American Dietetic Association*. 111(11): 1696-703. doi: 10.1016/j.jada.2001.08.007

<sup>7</sup> Anzman-Frasca, S. Mueller, M.P., Lynskey, V.M., Harlick, L., Economos, C.D. (2015). Orders of healthier children's items remain high more than two years after menu changes at a regional restaurant chain. *Health Affairs*. 34(11), 1885-1892. doi: 10.1377/hlthaff.2015.0651

<sup>8</sup> Harris, J.L., Hyary, M., Seymour, N., Young-Choi, Y. (2017). *Are fast-food restaurants keeping their promises to offer healthier kids' meals?* Report prepared for UConn Rudd Center for Food Policy & Obesity. Retrieved from [http://www.uconnruddcenter.org/files/Pdfs/272-9%20%20Rudd\\_Healthier%20Kids%20Meals%20Report\\_Final%20Round\\_Web-150dpi\\_080117.pdf](http://www.uconnruddcenter.org/files/Pdfs/272-9%20%20Rudd_Healthier%20Kids%20Meals%20Report_Final%20Round_Web-150dpi_080117.pdf)

<sup>9</sup> *ibid.*

<sup>10</sup> Shonkoff, E.T., Anzman-Frasca, S., Lynskey, V.M., Chan, G., Glenn, M.E., Economos, C.D. (2017). Child and parent perspectives on healthier side dishes and beverages in restaurant kids' meals: results from a national survey in the United States. *BMC Public Health*. 18(1)

<sup>11</sup> Percentage of Youths Aged 2-19 Years Consuming Any Fast Food on a Given Day, by Race and Hispanic Origin—National Health and Nutrition Examination Survey, 2013-2016, *MMWR Morb Mortal Wkly Rep* 2018;67:1134. doi: <http://dx.doi.org/10.15585/mmwr.mm6740a8>

<sup>12</sup> Harris, J.L., Frazier, W., III, Kumanyika, S., Ramirez, A.G. (2019). *Increasing disparities in unhealthy food advertising targeted to Hispanic and Black youth*. Report prepared for UConn Rudd Center for Food Policy & Obesity. Retrieved from [www.uconnruddcenter.org/targeted-marketing](http://www.uconnruddcenter.org/targeted-marketing)

<sup>13</sup> *ibid.*

<sup>14</sup> Berkeley Media Studies Group. (2017) *Health equity & junk food marketing: Talking about targeting kids of color*. A framing brief from Berkeley Media Studies Group. Berkeley Media Studies Group, a project of the Public Health Institute. Berkeley, CA. Retrieved from <http://www.bmsg.org/resources/publications/health-equity-junk-food-marketing-talking-about-targeting-kids-color/>

<sup>15</sup> Segal, L., Martin, A., Rayburn, J. (2016) *The state of obesity: better policies for a healthier America 2016*. Trust for America's Health. Retrieved from <https://media.stateofobesity.org/wp-content/uploads/2019/02/19162040/stateofobesity2016.pdf>

- <sup>16</sup> Wilcox, S., Sharpe, P.A., Turner-McGrievy, G., Granner, M., Baruth, M. (2013). Frequency of consumption at fast-food restaurants is associated with dietary intake in overweight and obese women recruited from financially disadvantaged neighborhoods. *Nutrition Research*. 33(8): 636-646. doi:10.1016/j.nutres.2013.05.07
- <sup>17</sup> Davis, B., Carpenter, C. (2009). Proximity of fast-food restaurants to schools and adolescent obesity. *American Journal of Public Health*. 99(3):505-10. doi:10.2105/AJPH.2008.1137638.
- <sup>18</sup> Lauby-Secretan, B., Scoccianti, C., Loomis, D., Grosse, Y., Bianchini, F., Straif, K. (2016) Body fatness and cancer—viewpoint of the IARC Working Group. *New England Journal of Medicine*. 375:794-798. doi:10.1056/NEJMsr1606602
- <sup>19</sup> *ibid.*
- <sup>20</sup> Fryar, C.D., Carroll, M.D., Ogden, C. (2018) *Prevalence of overweight, obesity, and severe obesity among children and adolescents aged 2-19 years: United States, 1963-1965 through 2015-2016*. Centers for Disease Control and Prevention (CDC). Retrieved from [https://www.cdc.gov/nchs/data/hestat/obesity\\_child\\_15\\_16/obesity\\_child\\_15\\_16.pdf](https://www.cdc.gov/nchs/data/hestat/obesity_child_15_16/obesity_child_15_16.pdf)
- <sup>21</sup> Sahoo, K., Sahoo, B., Choudhury, A.K., Sofi, N.Y., Kumar, R., Bhadoria, A.S. (2015). Childhood obesity: causes and consequences. *Journal of Family Medicine and Primary Care*. 4(2), 187-192. doi: 10.4103/2249-4863.154628
- <sup>22</sup> *Ibid.*
- <sup>23</sup> *Ibid.*
- <sup>24</sup> American Cancer Society. (2011) *Comment Letter to Federal Trade Commission on “Interagency Working Group on Food Marketed: Proposed Nutrition Principles FTC Project No. P094513”*. Retrieved from <https://www.fightcancer.org/sites/National%20Documents/ACS-CAN-Comments-on-IWG-Proposed-Nutrition-Principles-for-Food-Marketing-to-Children-7-14-11.pdf>