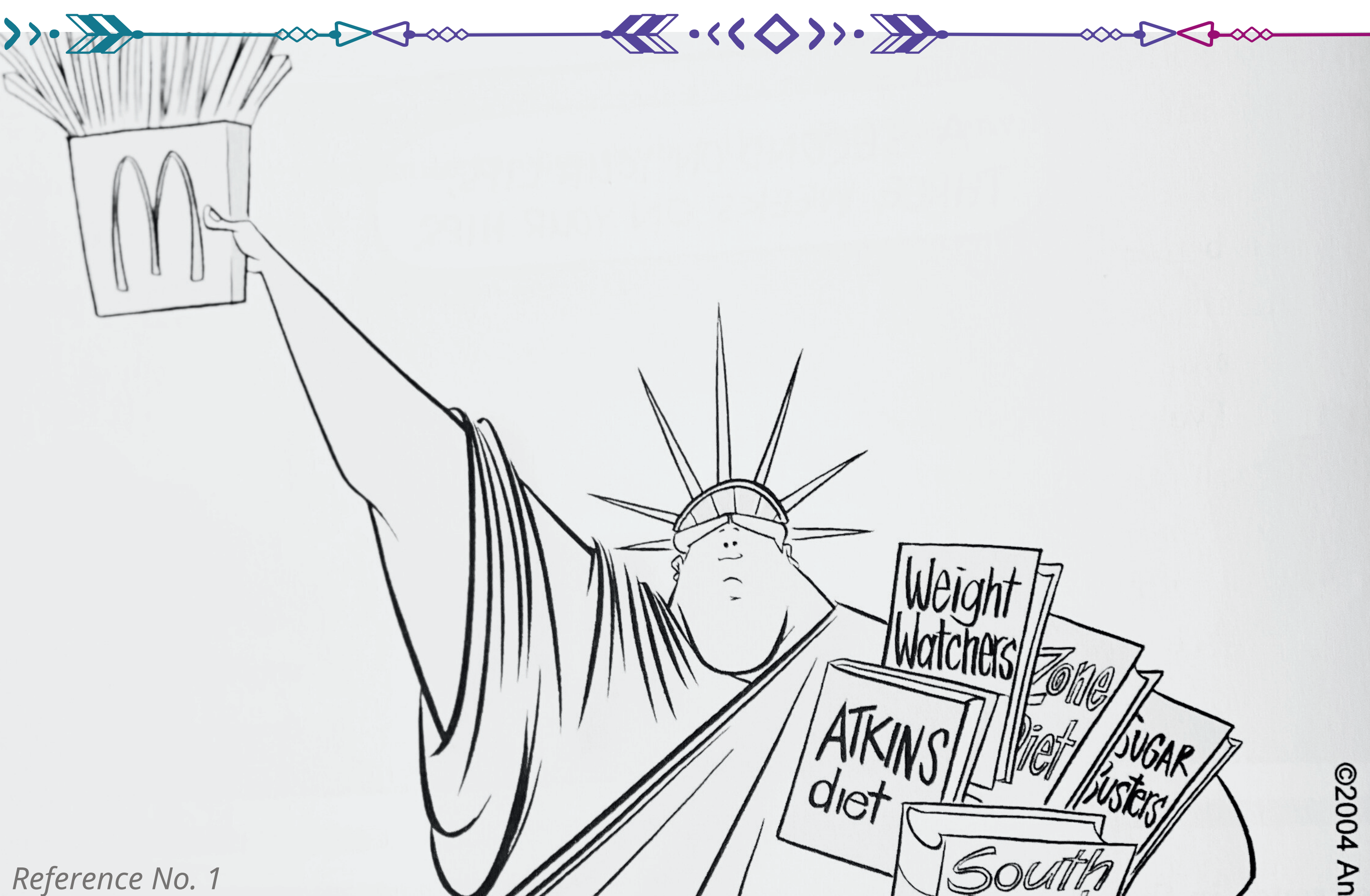


Has Exposure to Food Industry Marketing Impacted Obesity Rates in AI/AN Populations in the United States?

Nicole Terwey, Tennessee State University



Reference No. 1

01. Introduction

- Increases in food consumption have been observed as one of the major causes of obesity in adults and children in the United States.^{10, 14, 32} Food industry marketing has been linked to rising obesity rates.^{20, 22}
- Low-income Black and Hispanic populations are more susceptible to obesity due to socioeconomic and environmental factors.¹² Their health consequences are nearly identical to obesity problems AI/AN face.^{11, 22}
- Not exposing food industry marketing with obesity rates among AI/AN means current public health efforts to improve AI/AN health outcomes will be undermined and struggle to make faster changes.**

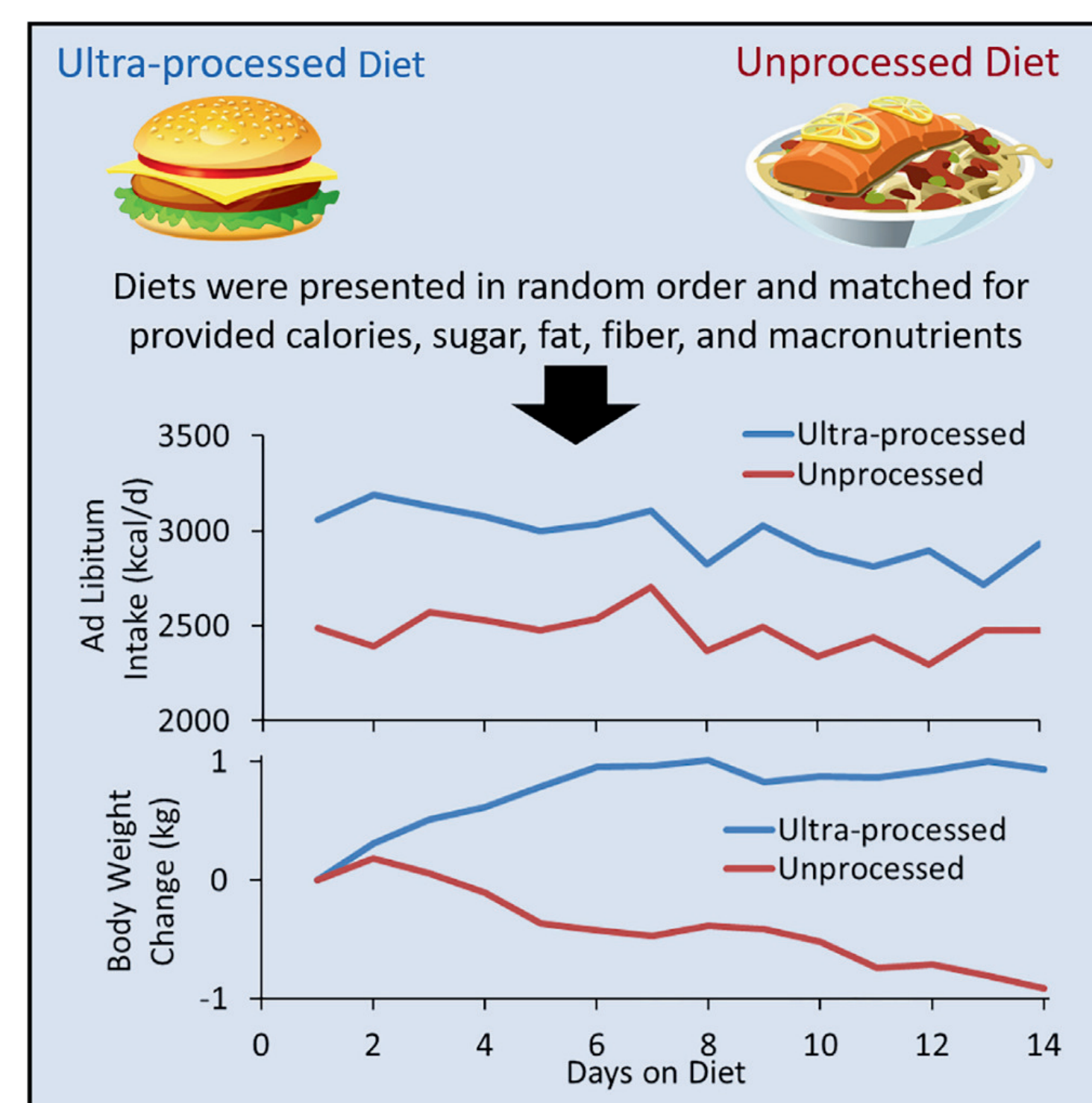
02. Methodology

- A brief literature review of 20 reports ranging from systematic critical reviews (5), scoping reviews (3), annual and developmental reviews of public health (2), peer-reviewed research (1), mixed-methods studies (2), literature reviews (2), research reports (4), inpatient randomized control trials (1), and books on food politics (2).
- Topics of the reports ranged from:

- Importance of good nutrition
- Ultra-processed diets
- Fruit and vegetable prescription programs
- Transfer of racial/ethnic marketing strategies
- Governmental food policies
- Sugar-sweetened beverages
- Tribal areas and food insecurity
- Politics of food marketing
- Obesity/obesity in children

03. Findings

- Ultra-processed food consumption leads to overeating and increases in body fat.^{20, 22, 32}
- Phillip-Morris tobacco company purchased large food companies and merged marketing and sales (tobacco to food). Marketing to minorities, initially African American and Hispanic populations, was a valuable target for profit.²¹
- Marketing to children leads to brand loyalty and desire.^{16, 27, 28, 30}
- Subsidized sugar and corn enables production of cheap foods and beverages that are more easily available in low-income areas.³¹ For AI/AN populations, ultra-processed foods and sugar-sweetened beverages, including alcohol, are more readily available than less-processed, wholesome, nutritious foods and drinks.^{24, 25}
- Produce Prescription Programs help lower obesity and increase health outcomes in children.³¹



Reference No. 2

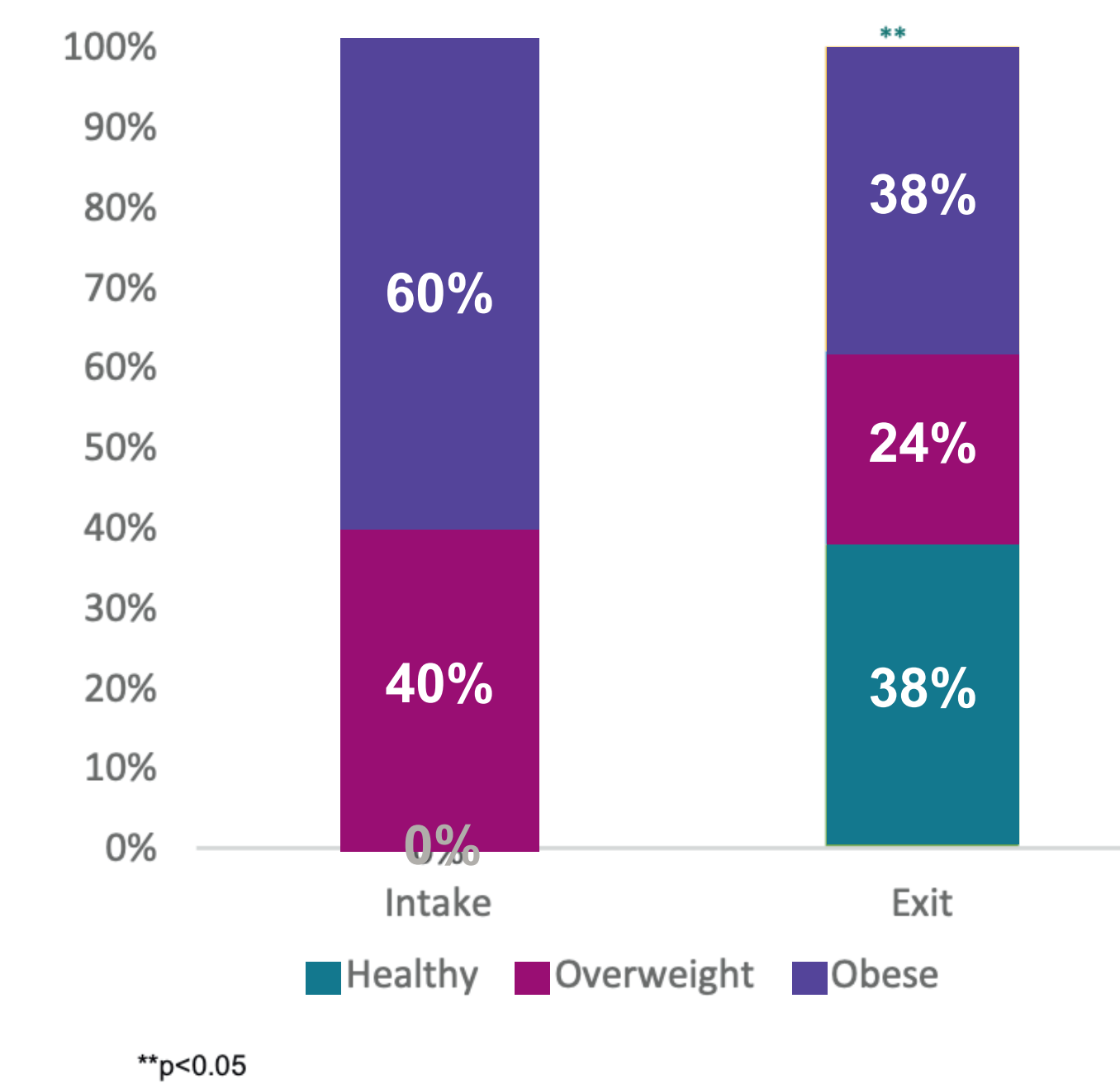
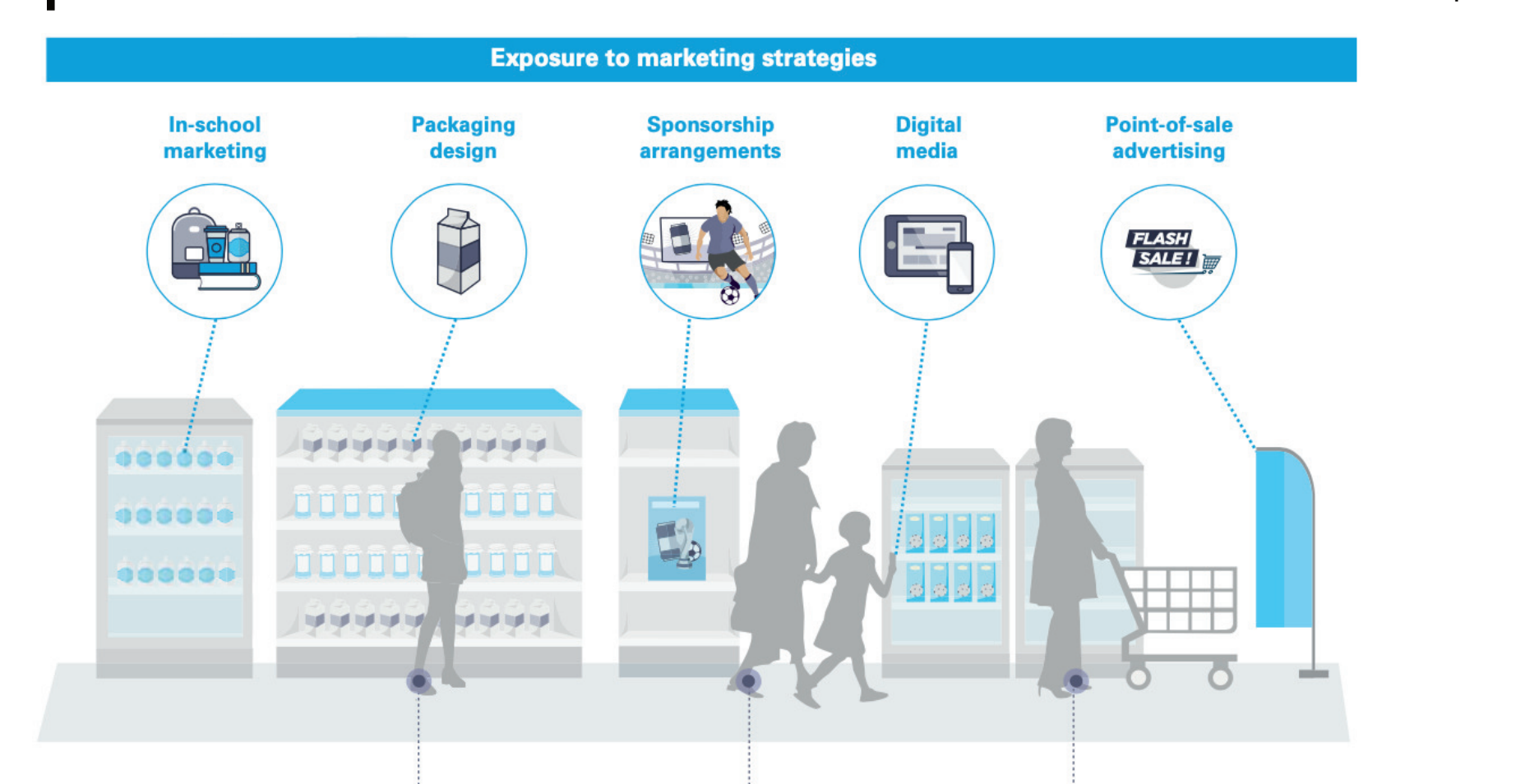


FIGURE 3 Changes in BMI categories among children classified as overweight or obese at baseline (n = 58). Reference No. 3

04. Discussion

Further investigating is needed of the role ultra-processed food and sugar-sweetened beverage marketing plays in AI/AN populations. If ultra-processed food and sugar-sweetened beverage companies don't curtail marketing from AI/AN populations, then obesity rates will continue to rise.¹

New marketing channels and techniques have a powerful effect on children



Reference No. 4

Produce Prescription Program Results in Young Navajo Children

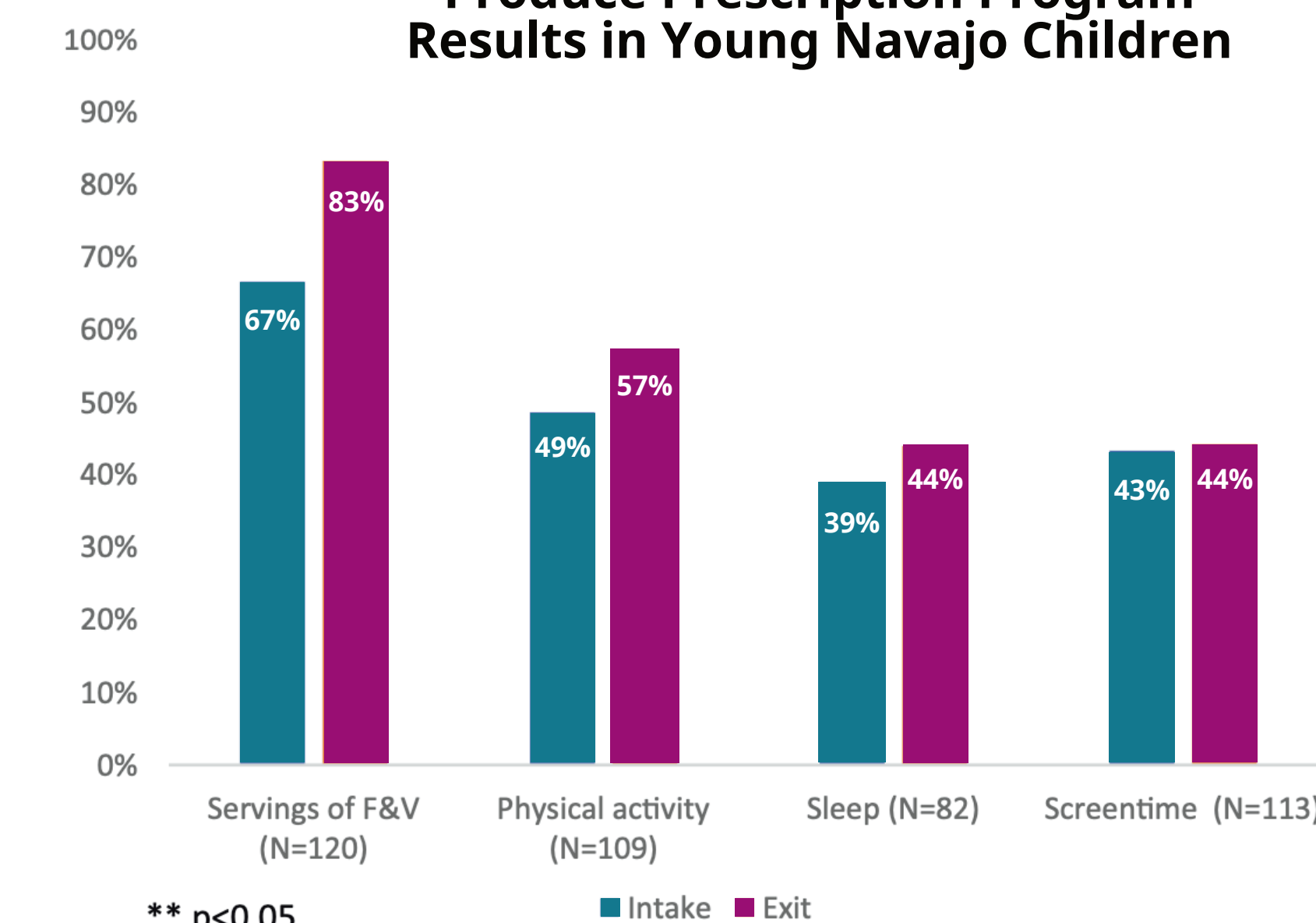


FIGURE 2 Changes in children meeting AAP recommendations, n = 120. AAP, American Academy of Pediatrics. Reference No. 5

05. Recommendations

Effective avenues for reducing obesity rates in AI/AN populations would be:

- Reduce marketing of ultra-processed foods and sugar-sweetened beverages, including in schools.**^{8, 14}
- Increase marketing for healthier foods and drinks** or fully replace marketing of ultra-processed foods and sugar-sweetened beverages with marketing of healthier foods and drinks.
- Implement Produce Prescription Programs** in all Indian Health Clinics and nearby hospitals.
- Support SNAP/EBT payments** in farmer's markets.
- Continue expanding current federal, state, and local efforts** to provide nutritious foods and beverages to AI/AN populations.

Putting Children's Best Interests First

FIG. 8. Responsibilities of Different Actors Reference No. 6

Governments

- Incorporate a child rights-based approach into all actions that have a potential impact on children, delivering on the obligations outlined in the articles of the CRC.
- Develop policies, legislation, regulation, and interventions through a participatory process that includes children's views about how these measures related to them.
- Implement, monitor, and ensure effective application of regulations seeking to address the children's rights impacted by unhealthy food marketing.
- Provide education that offers the knowledge parents and children need, and the conditions necessary for children's health and optimum development.

Businesses

- Make a public commitment to respect human rights, including the child rights outlined in the CRC as impacted.
- Having effective policies and processes in place to prevent negative impacts on children as relevant to all areas of business.
- Conduct ongoing human and child rights due diligence to understand impacts and policy monitoring and evaluation to ensure the effectiveness of current measure
- Establish mechanisms of redress that comply with all applicable laws and human rights standards.

Parents

- Dealing with the effects of children's 'pester power'.
- Raising awareness of children's online activities and exposure to unhealthy food marketing.
- Provide appropriate direction and guidance for children aligned with their developing capacities.

Acknowledgements References

I am deeply grateful to the Centers for Disease Control and Prevention's John R. Lewis Undergraduate Public Health Scholars Program and the Southern Plains Tribal Health Board (SPTHB) Tribal Health Experiential Student Internship Seminar (THESIS) for the opportunity of a lifetime. The level of organization and support from the THESIS staff has been exceptional. I am thankful to my mentor, Glahnnia Rates, for her time and commitment to my education. To my fellow interns... I can't wait to see how you change the world.

