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Children's Spanish-language advertising guidelines : a content analysis

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CHILDREN'S SPANISH-LANGUAGE ADVERTISING GUIDELINES:
A CONTENT ANALYSIS

A Thesis

Presented to the Faculty of the School of Journalism and Mass Communications

San Jose State University

In Partial Fulfillment
of the Requirements for the Degree
Master of Science

by

Maxine R. Goodman

May 2008

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ABSTRACT

CHILDREN'S SPANISH-LANGUAGE ADVERTISING GUIDELINES: A CONTENT ANALYSIS

By Maxine R. Goodman

In October of 2006, Washington asked the 50 top American advertisers to submit their budgets to Congress. The request resulted from pressure exerted by the health and medical establishment in response to obesity among children ages 6-12 and the advertising that experts felt related to the problem. The obesity rate among such children has more than tripled in the last 20 years. In December, 10 advertisers responded with Voluntary Children's Advertising Review Unit's (CARU) Guidelines. Legislators asked advertisers to follow the Food and Drug Administration (FDA) and the United States Department of Agriculture (USDA) guidelines for all foods that they advertise. This present thesis reviewed the commercials in the Hispanic market in relation to obesity to ascertain how closely advertisers followed the guidelines. All cereals, sodas, and candy met the USDA/FDA standards.

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TABLE OF CONTENTS

CHAPTER		PAGE
I.	INTRODUCTION	1
	Obesity Rate Increases	2
	Half of All Products Advertised Have High Sugar Content	4
	America Faces a Health Crisis	6
	Hispanic Population Projections	8
	Method Involves Television Watching	9
	Coding the Sample	10
	CARU Guidelines Advocate Healthful Choices and Lifestyles	10
II.	LITERATURE REVIEW	12
	Health Issues Facing Hispanics	12
	The Laredo Study	13
	Characteristics of the Hispanic Market	15
	Nine Million Children Are Obese	16
	Cultural Differences	17
	The Hispanic Diet	18
	Mexican-American Children Likely to Be Overweight	19
	Television Viewing May Affect Obesity	19
	Advertising Conceptual Theories	22
	Questions Asked about Television Viewing and Obesity	23

	Progress Made by Some Manufacturers	24
	CARU Expands Advisory Board	26
	Advertisers Need to Consider the Potential of the Hispanic Market	27
	Food Advertising	28
	Children Ages 8-12 Watch the Most Television	29
	Evidence Linked TV Viewing to Obesity and Inactivity	30
	Medical Recommendations to Curb Obesity	31
	FTC Responds	32
	Companies Back CARU Guidelines	32
	The Threatened Case against Kellogg and the Results	34
	England's Food Standards	36
	Conceptual Theories	37
	The Research Questions	39
	Today's Adults and Children Face Similar Health Threats	40
III.	METHOD	42
	Coding Guidelines	42
	Study Involved Watching Commercials	45
	Quantitative Method Used	46
	Content Analysis	47

IV.	RESULTS	49
	Sampling	52
	Cultural Nuances	62
	Only Three Cereal Aired	62
	Inter-reliability Coding	64
V.	CONCLUSIONS	65
	Limitations of the Study	67
	Hispanic Market Projections	68
	Inactivity Blamed on Television Watching	69
	Three Conceptual Theories	69
	Poverty Rate a Problem	70
	Some Advertisers Have Met Their Pledges	70
	Other Findings	71
	REFERENCES	73
	APPENDICES	83
	A. MyPyramid Foods Standards	84
	B. Children’s Advertising Review Unit (CARU) Guidelines	86

LIST OF TABLES

Table Title	Page
Table 1 Percentages of various Hispanic groups in the United States	12
Table 2 Prevalence of diabetes	14
Table 3 Television advertisers	35
Table 4 Constituents of a 1.55-oz., 230-calorie Hershey bar compared to USDA Guidelines: an example of the coding employed in this investigation	43
Table 5 Candy bars that exceeded USDA/FDA sugar content standards	47
Table 6 Cereals (per selected constituent, per serving) that met the USDA/FDA Guidelines for a 2,000-calorie diet, 2005	53
Table 7 Commercials for certain products that did not meet USDA/FDA Guidelines	54
Table 8 Six example beverages and the amount of certain components found in each 8-oz. serving in 2007/2008 compared to USDA/FDA Guidelines for Americans in year 2005	59
Table 9 Constituents found in a Twix candy bar compared to USDA/FDA Guidelines	61
Table 10 Some commercials shown on Hispanic television during January 2008	63

CHAPTER I

Introduction

Children see more than 30,000 television commercials each year. They view television, and, in effect, the commercials that sponsor the programs between an estimated four hours a day for the youngest children, 2-6-year olds, to 6-plus hours for those 10 and older (Gunter, MacAleer, & Clifford, 1991). Some advertisements invite children to try candy, fast food, soda, and other high fat and sugary foods (Linn, 2002; Teinowitz, 2007; Stockwell, 2005).

Several factors mix to cause children to increase their television viewing, and, in effect, add to the amount of time that boys and girls watch the accompanying commercials. More families than ever have two parents working or, in a single parent household, the one parent is employed. Mothers and fathers do not want their children to play outside without supervision, a situation that encourages youngsters to view more television and use computers instead of exercising (United States Department of Health & Human Services, 2002). The result is that televisions and computers, in essence, have become babysitters (Miller, Rosenbloom, & Silverstein, 2004a).

According to Mayo Clinic reports, children and families in the United States view television and operate computers and video games excessively while eating too much junk food (Burnett, 2006). The writer defines childhood to be ages 6-19, children 6-11, and adolescence 12-19. The obesity or overweight rate for children and adolescents increased from 4% in the 1970s to 29% in 2002-2003 (Braswell, 2006; Dietz, 1983; Lobstein & Jackson-Leach, 2007). Studies in 2003-2004 demonstrated that more than 35% of American children were overweight or obese (13% obese) (Lobstein & Jackson-Leach,

2007). One author has characterized this prevalence of overweight and obesity in children and adolescence as a “health epidemic.” Currently, nine million children 6-11 are affected (Krisberg, 2004a). The writer uses “obesity” and “overweight” interchangeably here as undesirable health conditions that one suffers if he has, according to experts, a “Body Mass Index” (BMI) on or above the 95th percentile for gender and age (BMI-for-age) (National Children and Fitness Study (Gortmaker, Dietz, & Wehler, 1987). The professional literature often defines obesity as weight-for-height in excess of 120% of an individual’s ideal skin fold measurements. By measuring the skinfolds, such as triceps alone, triceps and calf together, and calf alone, a trained technician can determine obesity. Obesity also is an excessive accumulation of body fat, when total body weight is more than 25% fat in boys and 32% in girls (Lohman, 1987). The federal Office of Maternal and Child Health estimated in 1989 that five to seven percent of White and Black children were obese, while 12% of Hispanic boys and 19% of Hispanic girls were obese.

Obesity Rate Increases

Studies show that the child and adolescent obesity rate increased among American children during the 1970s, when observers found that 4% of ages 6-11 were “obese” and 6% of ages 12-19 were “overweight” in 2006 (Braswell, 2006). According to an Institute of Medicine (IoM) report, one would find such a weight increase among boys and girls in every part of the country with certain populations, such as Hispanics and American Indians, proportionately affected. Being overweight during childhood and adoles-

cence increases the risk of developing problems, such as Type 2 Diabetes, depression, and orthopedic troubles (United States Department of Health & Human Services, 2002).

Health experts at Boston Children's Hospital (BCH) consider such high obesity rates a "health epidemic" and attribute the situation to three main factors: diet, activity levels, and family structure. Children today have ready access to fast foods and sugar-filled beverages. BCH has suggested that when a child drinks one serving of soda, the youngster increases its chance to become obese by 1.6%. Another contributing factor to the child obesity rate is the amount of time that youngsters spend inside the home, hours that displace outdoor physical activity. In addition, because many school systems have eliminated physical education classes, the resulting lack of a proper amount of physical activity only exacerbates the obesity problem (Braswell, 2006). Children are exercising less worldwide, a situation that creates increased caloric intake. Rather than climbing stairs and walking, children and adolescences use elevators and escalators, and people transport them by car.

Studies have shown that Hispanic children exercise less than boys and girls in other populations (Manier, 2006a). Although Hispanics have a strong tradition to eat as a family, their diet often consists of several fatty elements, including many fried foods (Warrix, 1993).

The United States Department of Health & Human Services noted that a National Health and Nutrition Examination Survey (NHANES, 2002) found that African-Americans and Mexican-Americans, ages 12-19, were more likely to be overweight at 21% and 23% respectively, than were non-Hispanic White adolescents (14%). In children ages 6-11, the study further pointed out, 22% of Mexican-American boys and girls

were overweight compared to 20% of the African-American, and 14% of the non-Hispanic White. Thirty-one percent of Chinese-American children ages 6-11 were overweight (Chen & Kennedy, 2005). In addition to the number of children and teens that were overweight during 1999-2002, the study also pointed out, another 15% were at risk of becoming so. In a national survey of American-Indian children ages 5-18 observers found that 39% were overweight or at risk. Experts believed that the danger for one to be overweight corresponds with a BMI-for-age reading of between the 85th and 95th percentiles (United States Department of Health & Human Services, 2002).

Half of All Products Advertised Have High Sugar Content

The American Academy of Pediatrics recently stated that of the more than 30,000 commercials children see each year, half are for foods that researchers believe have high sugar content (in cereals) and are high in calories and low in nutrition (high-density snacks). Many of these foods contain high fructose corn syrup, not a healthful ingredient, according to Dr. Dimitri Christakis, a pediatrician at Children's Hospital and Regional Medical Center in Seattle, and the author of the recent book, *The Elephant in the Room: Make TV Work for Your Kids* (Condor, 2006).

In addition, high fructose is an ingredient in sodas, such as Dr. Pepper, Coca-Cola, 7Up, Mountain Dew, Sierra Mist, and Pepsi. The government, consumer groups, and the food industry have debated the product's nutritional value. Manufacturers produce the sweetener by milling corn to produce cornstarch, then processing the cornstarch to yield corn syrup that is almost entirely glucose. When one adds enzymes to corn syrup, glucose becomes fructose. Although experts, such as Dr. Walter Willett, Harvard Medical School of Public Health Nutrition department chairman, claim there is no sub-

stantial evidence to support the idea that the high fructose is responsible for obesity, there are those who disagree. The American Academy of Pediatrics notes that some 12-oz. soft drink cans with the element contain as much as 10 teaspoons of sugar (New Scientist, 2006).

Digestion, absorption, and metabolism associated with glucose differ from those of fructose. Unlike glucose, fructose does not stimulate insulin, which, in part, regulates food intake and body weight. Chemistry suggests that dietary fructose may contribute to increased energy intake and weight gain, thus encouraging people inadvertently to over consume (Bray, Nielson, & Popkin, 2004). A 2001 Massachusetts study, Community Action to Change School Food Policy: an Organizing Kit, found that daily consumption of a sugary drink raises the risk of a child becoming obese by 60% and contributes to tooth decay. In addition, soft drinks deprive children of vital minerals, such as calcium. It is pertinent to observe that children form approximately 40% of their peak bone mass during their school years: past generations gained much of their calcium from milk (New Scientist, 2006).

Fructose is the sole sweetener in soft drinks in the United States. Candy and soda manufacturers also receive corn subsidies for using the substance. Various companies received \$22.7 billion in subsidies in 2005 (Hopkins, 2006). Coca Cola gained a cost advantage of \$70 million a year over Pepsi and its bottlers, when the Atlanta-based firm accepted subsidies. In 2006, Pepsi followed in Coke's subsidy-accepting footsteps (Warner, 2006).

The cost for pediatric obesity hospital stays has escalated from more than \$43 million per year in 1983 to \$127 million in 2004 (Miller, Rosenbloom & Silverstein,

2004b). With 45% of Hispanic children and adolescents ages 6-19 having at least one risk factor for obesity, heart disease, and hypertension, the situation may mean that being hospitalized will be the fate of too many children (United States Department of Health & Human Services, 2002). The increased hospitalization costs are not so much due to inflation as to the reality that people have altered their eating and lifestyle habits. The gene pool cannot change in less than a generation (Miller, Rosenbloom, & Silverstein, 2004b).

America Faces a Health Crisis

With health costs rising faster than gas prices, obesity is a health problem that the country must solve, or America will face a crisis that will plague the nation for coming generations. Taking preventative measures, such as providing and arranging for exercising, must become national policy (Burnett, 2006). Researchers have directly related watching television to obesity rates: children who view television more than five hours a day are obese 8.3 times more often than those who watch two or fewer hours daily (Miller, Rosenbloom, & Silverstein, 2004). Children ages 8-18 spend more than 44.5 hours per week in front of computer, television, and game screens, far more time than they participate in any other activity, except sleeping (National Institute on Media and the Family, 2005). Researchers at Columbia University and Bassett Healthcare in New York found Hispanic youth watched 15 hours of television per week compared to 13 for White children (Childhood Weight Control Program, 2002).

Evidence has shown that a 30-second food commercial can influence a child's food desires (Story & French, 2003). With fast food restaurants offering larger sizes and children pestering their parents to take them to those places for toys received with a food

purchase, commercials that promote the food-toy duo have contributed to increasing obesity rates (Byrd-Bredbenner & Grasso, 2000).

Because health risks, such as Type 2 Diabetes and obesity, are higher among Hispanic children and adolescents than they are for other segments of the population (United States Department of Health & Human Services, 2002), the present study examined typical cereal, candy, and soda commercials to determine if the messages encouraged “healthy lifestyles” and “healthy dietary choices.” Some observers say that in the mainstream market, advertisers target even the youngest audience, putting it at risk for poor nutrition, when the firms advertise cereals and candy with high fat and sugar content (Hastings, Stead, & McDermott, 2002). This thesis, in part, examined commercial television messages aimed at Hispanic children ages 6-12 to determine if they project a “healthy lifestyle” that includes exercise. Another thesis aspect examined whether or not advertisers promoted “healthier dietary choices” to children, that is, if advertisers abided by the rules for a desirable diet as defined by the United States Department of Agriculture (USDA) and the United States Food and Drug Administration (FDA) dietary guidelines and MyPyramid, the USDA healthful food guidance system. The FDA defines “healthy foods” as those that meet USDA/FDA standards for “free,” “low” or “reduced” calories, total fat, saturated fat, sodium, and sugar. The government agencies encourage parents to purchase products that offer portion-control options, such as 100-calorie pack foods. MyPyramid recommends specific food servings each day, like vegetables, fruits, and starches, and recommends that a person exercise at least 30 minutes daily (USDA Guidelines for Americans, 2005; United States Food and Drug Administration, 2005; MyPyramid, 2005).

The writer also studied the 2006 voluntary guidelines released in December 2006 by the food industry's Children's Advertising Review Unit (CARU), a part of the Council of Better Business Bureaus (CBBBs), to determine whether advertisers in the \$736-billion Hispanic market had followed health guidelines (Council of Business Bureaus, 2006a; USDA, 2005). The Hispanic market compares to the \$761-billion Black market, the \$100-billion Asian market, and the \$51-billion Native-American market. The total United States consumer market totals \$9.1 trillion (Humphreys, 2005). If this study is valuable, it is partly because it examines the effect produced by the lack of the government's monitoring of advertisers in the Hispanic market (Woods, 2006). The investigator coded each product examined, comparing USDA/FDA daily value (DV) standards for constituents to the quantities of those constituents in the product. The writer used the same method to code the cereals, candy, and sodas discussed in this investigation.

Hispanic Population Projections

The government projects that almost 24% of the nation's population will be Hispanic by 2050 (National Academy of Sciences, 2001). Approximately 45% of that number, or more than 46,900,000 Hispanic youth, are at risk for obesity, Types 1 and 2 Diabetes, and hypertension. This study compares commercials that focus on food that is high in fat, saturated fat, carbohydrates, sodium, sugar, and cholesterol, all contributing factors to disease, and obesity, and those messages that have met USDA/FDA guidelines for encouraging exercise and making healthful dietary choices and carrying out healthful lifestyles (National Academy of Sciences, 2001a; Sorof, Dejian, Turner, Poffenbarger, & Portman, 2004a).

Statistics released by the United States Department of Health & Human Services, the Mayo Clinic, and the National Health and Nutrition Survey indicate that children in the United States are suffering from overweight, obesity, diabetes, hypertension, and orthopedic problems. The revelation prompts the writer to review the literature that takes up health issues facing Hispanics and studies that link television watching with inactivity, obesity, and children's increased consumption of unhealthful foods (United States Department of Health & Human Services, 2002).

Method Involves Television Watching

The method used in this study involved watching commercials, with a DVD recorder, in the Hispanic market from 8-11:30 a.m. Saturdays and Sundays and 5-5:30 p.m. five days a week for seven weeks (170 total viewing hours) during November 2007 and January 2008 on the Spanish-language television networks Galavision (Channel 66), Univision (Channel 14), and Telefutura (Channel 20). The programming in the early hours on weekends featured cartoons and PBS-style offerings, such as "Animals" and "Ed the Science Guy." Stations also usually aired soccer from 10 a.m.-1:30 p.m. or from 3-5 p.m. on Saturdays or Sundays. Because Hispanics have fewer televisions sets per household than do other population groups, children watched cartoons and novellas (soap operas) with their parents rather than viewing programs on personal television sets. There were fewer children's programs on Spanish-language television than there were in the main steam market (Clemens, 2006a). During the programs observed, the writer noted what cereal, candy, and soda commercials the stations broadcast, analyzed the message content by answering questions suggested by CARU guidelines, and provided answers based upon research results.

Coding the Sample

The researcher considered a number of factors while coding. One also posed questions based upon the USDA/FDA's 2,000-calorie diet for adults and children over four, after watching soda, candy, and cereal advertisements. For example, the USDA/FDA guideline for sugars in 2005 was 16g. per 8-oz. serving for a 2,000-calorie diet. The following sodas that the writer compared and coded, based upon the year 2005 guidelines, exceeded a 16g. per 8-oz. serving for sugars: Dr. Pepper (27g), 7Up (25g), Coke (27g), Pepsi (28g), Sierra Mist (26g), and Mountain Dew (31g). In June 2007, however, the recommended standard for sugars changed to 12g. for a 200-calorie serving (Martin, 2007a). According to the President Bill Clinton Foundation and the American Heart Association, children ages 15-19 drink two 12-oz. cans of soda per day, amounting to a 1.5-pound bag of sugar per week. Among children ages 6-14, soda is the most heavily consumed drink. In the 11-14-year old age group, soda accounts for 24% of all beverages (Kluger, 2006).

CARU Guidelines Advocate Healthful Choices and Lifestyles

The CARU guidelines define "healthy dietary choices" and "healthy lifestyles" and include information that encourages people to exercise in accordance with USDA/FDA and MyPyramid standards. Other CARU guidelines address separating product placement from editorial and entertainment content, reducing third-party licensed characters that do not meet the guidelines, and limiting products shown in interactive games to those with healthful dietary messages. Lastly, they take up a guideline review process that allows one to take the initiative to combat "unfair" or "misleading" advertising, such as communications that blur commercial messages with editorial content. The

writer determined if and how conscientiously many advertisers followed the guidelines. The food industry first released CARU guidelines in December 2006 after the Federal Communications Commission (FCC) asked the 50 top food advertisers to present their budgets, a request aimed at regulating junk food advertising spending. Of the 50 brands, 10, or 20%, gave positive, immediate responses.

Because much of the literature takes up health issues facing Hispanics, such as Type 2 Diabetes, this thesis reviews a study of children's obesity in Laredo, Texas, a predominantly Hispanic city characterized, in part, by overweight children. One will compare, as well, the characteristics of children's weight in the Hispanic market to those of all children nationally. Examining groups other than the Hispanic in relation to the country's obesity, the study will note the cultural differences that define Hispanics and explore how advertising affects those who watch television while eating dinner. The researcher will look at food advertising conceptual theories, especially those that affect obesity and result in inactivity. Furthermore, the project will explore how closely certain manufacturers followed CARU guidelines and kept their pledges not to advertise to children under age 12. Other topics that the writer will take up are the amount of progress toward meeting federal guidelines that some manufacturers, like Kellogg, made (because they felt threatened by a potential lawsuit), England's food standards, and the situation facing today's adults and children who are subject to diseases caused by not following federal guidelines for maintaining and preserving one's health.

CHAPTER II

Literature Review

Health Issues Facing Hispanics

This literature review discusses, in part, the importance of the Hispanic market concerning food advertising and food consumption habits, because 23% of Mexican-American adolescences ages 12-19 are more likely to be overweight, and 22% of children ages 6-11 already are overweight (United States Department of Health & Human Services, 2002b). The Bureau of the Census projects the Hispanic market to number 102.6 million people by July 2050, people who will comprise 24% of the American population (National Academy of Science, 2001; United States Bureau of the Census, 2005). Scholars credit high birth and immigration rates, reflected in Table 1 below, with current Hispanic growth in the overall United States market (Lanfranco, Ames, & Huang, 2002).

Table 1 Percentages of various Hispanic groups in the United States

Some Hispanic groups in the United States	Percentages of Hispanics in the United States
Mexican Background	64%
Puerto Rican Background	10%
Salvadoran, Cuban, And Dominican Background	3%
Central American Background	4.8%
South American Background	3.8%

Sixty-three percent of the 9.5 million Hispanic families, or more than 5,985,000 children, are under age 18 (United States Bureau of the Census, 2005). The explosive Hispanic-American population growth over the past 20 years, from 6.9 million in 1960 to more than 35 million in 2000, marketers, as well as sociologists, nutritionists, and physicians, have noticed (National Academy of Science, 2001b).

Physicians and health professionals are especially interested in Hispanic health problems. The largest study the country ever launched, one that particularly focuses on Hispanic children, may unlock the key to the nation's obesity by examining for fatness the health records over three consecutive years that pertain to third, fourth, and fifth graders in 38 schools in Laredo, Texas (White, 2006).

The Laredo Study

More than 20.8 million Americans have diabetes or 7% of the United States population. Statistics show that health professionals diagnose as diabetic only 14.6 % of those that have the disorder, while an estimated 6.2 million are undiagnosed (United States, National Institute of Health, National Diabetes Fact Sheet, 2005). While more than 94% of Laredo is Hispanic, 42% of Hispanic children there are obese. Dr. Hector Gonzales, Laredo Health Department director, has observed that Mexican-Americans are genetically predisposed to Type 2 Diabetes. Gonzales points out that since 10.6% of this group have diabetes, they are 1.9 times more likely to be diabetic than non-Hispanic Whites of the same age (White, 2006). Nine percent of American Indians and Alaska Natives have diagnosed diabetes, 2.8 times more than non-Hispanic Whites also the same age. For Asian and Pacific Islander Americans, data is limited, showing only that experts believed that Native Hawaiians, 1988-1995, were twice as likely to become diabetic, as were White residents of Hawaii (United States, National Institute of Health, National Diabetes Fact Sheet, 1997).

“Bigness” is an idea that advertisers of fast foods often promote (White, 2006). The ongoing Laredo study, aiming, in part, at controlling risk factors, hopes to avert the attractiveness of convenience foods, to reeducate children to understand that bigger por-

tions are not necessarily better, and to provide better nutritional guidance than children now receive. Type 2 Diabetes can lead to blindness, kidney failure, amputations, and death if left untreated, according to Gonzales.

One may take another view of diabetes prevalence in the American population, in part, by considering some statistics for 2000-2005 for Hispanics/Latinos of one race or more, Blacks, and Native Americans, all of who were 20 years old or older displayed in Table 2 below (United States Bureau of the Census, 2000; United States National Institute of Health, National Diabetes Information Clearing House, 2005).

Table 2 Prevalence of diabetes

Population group	Population of each group in the United States, 2000-2002	Percentage of people 20 years old or older that have diabetes	Number of people for every 1,000 individuals with diabetes, 2005	Number of people for every 100 individuals with diabetes, 2005
Hispanics/Latinos of one race, age 20 or older	22,354,059 in 2000	9.5% or 2,500,000 individuals in 2002.	84	8.4
Non-Hispanic Blacks age 20 or older	35,816,000 in 2000	13.3% or 3,200,000 individuals in 2005.	111	11.1
Native Americans/ Alaskan natives age 20 or older	4,119,301 in 2000	12.8% or 99,500 people in 2005 (estimated percentage based upon 2003 statistics and projected to 2005).	41	4.1

The American Obesity Association believes that the same criteria that detect diabetes in adults health professionals should apply to children, because, as one scholar has observed, overweight children are more likely to become obese adults and face serious health problems, such as diabetes and high blood pressure (Manier, 2006; White, 2006).

Characteristics of the Hispanic Market

While Hispanics strive to assimilate, there is a dichotomy characterizing them. They have a pattern of poverty, isolation, and exhibit a tenacity to keep their Spanish language. The government defines a median income of \$19,350 for a family of four as poverty level in the United States. For a Hispanic family of four, however, the 2004 median income was \$34,241 (poverty rate 21.9 %). The median income for Blacks was \$30,134 (poverty rate, 24.7%), for Asians, \$57,518 (poverty rate, 9.8%), and for non-Hispanic Whites, \$48,977 (poverty rate, 8.6%) (US Census, 2005).

United States households have 31 million residents age five and older who speak Spanish at home and are prone to view television, if they own a set. Spanish speakers make up more than one in every ten United States households. The Spanish-language Univision television network is fifth-ranked in the United States, indicative of the Hispanic desire to watch the small screen in Spanish (Terry-Azios, 2000).

Although the Hispanic market is young, with 63% under age 18, it is poised to present challenges in the health field, particularly since 32.7% of Hispanics stated in 2004 that they lacked health insurance (United States Census Bureau, 2005). The health problems of obesity, Type 2 Diabetes, and hypertension of course compound the matter by putting the health system at risk to be overloaded (Krisberg, 2004; Sorof, Dejian, Turner, Poffenbarger, & Portman, 2004b). They are part of the health epidemic that Washington's Institute of Medicine has declared to be a national public health priority. Hispanics, Blacks, and American Indians are disproportionately affected. Although the health problems of children in every economic stratum across the country are involved, obesity is the most prevalent in the Hispanic community. During 1999-2000, 23% of

Mexican-American adolescents ages 12-19 and children ages 6-11, 22% of Mexican-Americans, were overweight (Houck, 2006) compared to 21% at risk for obesity for African-American children and 14% of non-Hispanic White youngsters. In a national survey of American Indian boys and girls ages 5-18, researchers found that 39% were overweight or at risk for being overweight (United States Department of Health & Human Services, 2002). The obesity rate for Asian children is 31% (Chen & Kennedy, 2005).

Nine Million Children Are Obese

Currently, the government estimates that nine million children older than six are obese. During the past 30 years, obesity among children ages 6-11 has more than tripled from 5% in 1983 (Dietz, 1983) to 16% in 1999-2000, to 29% in 2002 (United States Department of Health & Human Services). By 2004, the figure had risen to above 35% (Lobstein & Jackson-Leach, 2007b). As a result, Congress is now looking at ways to promote healthful lifestyles (Krisberg, 2004b).

According to a University of Wisconsin-Madison study published in the *American Journal of Public Health* (Manier, 2006), in the Hispanic community, 44% of children from low income families are identified as being at risk for obesity, compared with 32% of African-American children from poor backgrounds. The study, which included a random sample of low-income children in 20 cities, found 14% of Hispanic-descent 3-year olds took bottles to bed, a practice against which pediatricians warned. Physicians observed that such behavior contributes to tooth decay and being overweight. In contrast, researchers noted that Black and non-Hispanic White children did not take bottles to bed, although at the time of the study there were no specific data available for them or for Asian children (Graham, 2007; Cohen, 2007). Dr. Dennis Barr, director of the USDA's

Children Nutrition Research Center at Baylor College of Medicine, noted taking bottles to bed supports other data that obesity starts early in life (Manier, 2006).

Cultural Differences

Cultural differences in the Hispanic and the African-American communities also contribute to heavier children, because these enclaves consider chubbiness a sign of a healthful baby. Another cultural difference that has contributed to the Hispanic obesity rate is that mothers give children food when the youngsters may not be hungry (Manier, 2006b). Claudia Gonzales and Lourdes Alcaniz' book, *Gordita Doesn't Mean Healthy*, discusses the reality that in the Latino community a chubby baby, or "gordito," is a cultural preference. The practice can lead to overweight children, said Gonzales, a Miami pediatric dietitian and spokeswoman of Latino affairs for the American Dietetic Association. She also noted that cooking for others is "a symbol of love" and that rejection of the symbol is "considered offensive." The family kitchen, furthermore, is often the center for Hispanics, a place where the cooking provides a chance to interact, as well as to eat (Houck, 2006).

Although research about obesity in 20 cities showed that three-fourths of the obese children living in those places came from families who received federal food aid, the families lived in low-income areas where grocery stores were not common. Mothers had to walk, take a bus, or taxi to the grocery store, where fresh fruits and vegetables were not readily available. In any case, mothers chose food that would last. Some foods that they selected were high calorie, such as prepared foods, and they were less expensive. Since the foods would last longer, the mothers could avoid making additional trips (Manier, 2006b). While some food companies target their marketing efforts to ethnic

groups, such as the Hispanic, the food industry does little to educate low-income and minority groups (Lee, 2006).

The Hispanic Diet

In the United States, Mexican-Americans comprise 64% of the Hispanic/Latino population. The difference between Puerto Ricans, who are United States citizens, and Mexican and other Latin American countries includes the factor that 500 years of history passed after the Spaniards arrived, the colonial era ended, the establishment of the many Latin American nations, and the United States' acquisition of Latin American lands. While the cultures differ concerning what foods to eat and the names that people give them, many of the foods are the same, such as beans, especially black beans, in each society. Cubans, for example, consume bananas as a starch staple, as well as black beans, for protein. The Mexican-American diet is rich in a variety of foods and dishes that represent a blend of Pre-Columbian, Spanish, French, and, more recently, United States, cultures. The typical Mexican diet contains an adequate amount of protein in the forms of fish, eggs, and shellfish, and a variety of meats, including beef, pork, poultry, and goat. Due to the extensive use of frying, the Mexican diet also is high in fat. Such a diet, though, lacks enough calcium, iron, Vitamin A, folic acid, and Vitamin C to be a healthful food regimen.

Immigration to the United States brought several changes to the Mexican-American diet. Ongoing consumption of moderate, but increased, amounts of milk, vegetables, and fruit is a healthful change. Hispanic consumers are using less lard and Mexican cream, but with the introduction of cooked vegetables and salads, they take in more fat via salad dressings, margarine, and butter. Mexican-Americans also have favored

more high-sugar drinks over their traditional fruit beverages. Additionally, Mexican-American consumption of more inexpensive sources of complex carbohydrates, such as beans and rice, has declined because of acculturation (Warrix, 1993).

Mexican-American Children Likely to Be Overweight

Twenty-three percent of Mexican-American adolescents ages 12-19 are more likely to be overweight. Of Mexican-American children ages 6-11, 22% were overweight. Hispanics also have a genetic predisposition to Type 2 Diabetes, a link to obesity. Of course, Laredo, Texas, is now studying the obesity problem in a single city. The following section will discuss the results of studies that revealed how television viewing during dinner is linked to obesity, what items children request after viewing television, and the effects that Hispanic parents have on youngsters, when the parents keep them inside the home, whether the families live in the inner city or not. All these factors contribute to the Hispanic community's childhood obesity problem.

Television Viewing May Affect Obesity

Other problems result when Hispanic children watch television at dinnertime, according to Karen Cullen, a behavioral nutritionist at the USDA's Children's Nutrition Research Center (Cullen, 2000). Researchers at Baylor College of Medicine found a link between 42% of dinners consumed at home in Houston, Texas, and obesity among 287 fourth, fifth, and sixth graders, dubbed "the TV-dinner" kids by the Baylor group, during one week of television viewing. The researchers found that heavy children ate 50% of their dinners while watching television, but that normal weight children looked at television while eating dinner only 35% of the time. Forty-three percent of Black boys and girls viewed television during dinner. Twenty-one percent of Asian-American children,

the smallest percentage of all children surveyed, while European-American children ate their dinner meals 32% of the time while viewing the medium. The American Dietetic Association in 2000 at its annual meeting in Denver (Cullen, 2000) made the research public.

Researchers also found that 62% of Hispanic children did their homework and/or ate dinner while watching television. These children tended to be overweight. In other studies, researchers linked television watching to inactivity. Television commercials that featured sugar-laden, high fat sodas, cereals, and other foods, such as candy targeted children (Cullen).

Other research revealed that children tend to ask for food items that broadcasters promote more frequently on television than those that never or seldom air. In studies by Valkenburg and Buijzen (2005), 196 2-8-year-olds recognized eight of 12 brands that researchers displayed to them. The results correlated with children's frequent requests for purchases of those products. Children ask for brands as early as two years old. Youngsters learn to make requests by watching television, the vehicle for most of the media messages. From pre-adolescence, ages 8-10, preteens have the ability to process advertisements but do not necessarily do so. When they reach early adolescence, ages 11-12, however, children possess and practice abstract reasoning (Story & French, 2003).

Most of the food items that the researchers showed to the children were not always nutritious, or they were low in nutrition (Buijzen & Valkenburg, 2005). Researchers concluded that food commercials often suggest that food is "fun," rather than stating that certain foods have healthful aspects, while others do not, or that food satisfies hunger, whether it is healthful or not. Advertisers did not stress how food fits into a "healthy

diet.” As a result, researchers have recommended that parents eat dinner with their children and while doing so point out which foods are healthful and which are not. Past data shows that families that have such discussions raise children who practice healthful eating habits (Cullen, 2000). Because Hispanics devote more of their income to food consumed at home, partially because they have larger families than do non-Hispanics, they are more prone to obesity. Hispanics could apply those realities to be vigilant about their food consumption (Lanfranco, Ames, & Huang, 2002).

In 2003, Hispanic parents living in inner cities kept nearly half their children younger than 18 inside the home, that is, away from what the parents perceived as danger. The percentage compared to 39% of Black children, 24% of Asian children, and 25% of non-Hispanic White children in inner cities. The percentage was the same for Hispanic children living outside central city areas (Glauber, 2007). When Hispanic parents keep their children inside, the likelihood of the children watching television with its many commercials is greatly due to Hispanic tradition, that is, although Hispanic homes have fewer television sets than do other American groups, according to Nielsen Media Research, the family together views programs. A mother and father look at cartoons with their children, and children ages 2-11 view primetime novellas (soap operas) with their parents (Clemens, 2006b). In the following section, the writer will discuss certain conceptual advertising theories that link obesity and childhood inactivity to Type 2 Diabetes, those that link advertisements that target children with children consuming low nutrient foods, and commercials that link advertising to energy imbalance and weight gain.

Advertising Conceptual Theories

One conceptual theory of the Harvard School of Public Health and Boston's Brigham and Women's Hospital also attempted to show that increased television watching is linked to inactivity. Researchers found that television watching increases obesity and Type 2 Diabetes, because it displaces physical activity, therefore reducing energy expenditure. Researchers also observed that television viewing increased food consumption, which resulted in lower energy intake. Cued by commercials, those who watched the greatest amount of television had the most unhealthful eating patterns (Hu, 2003).

Several studies show advertisers target even the youngest audience, putting it, some researchers say, at risk for poor nutrition by advertising sodas, cereals, and other foods that are sugar laden and have elevated fat content. Such foods are high in calories and low in fiber and nutrient density (Hastings, Stead, & McDermott, 2002; Kaiser Family Foundation, 2004).

Some research as far back as the 1970s and 1980s showed a link between advertising and obesity. Children under age eight, those studies indicated, were more susceptible to advertising, because they cannot distinguish an advertisement from the programming (Bandyopadhyay, Kindra, & Sharp, 2001). A second conceptual theory demonstrated that both younger and older children pestered their parents for foods that they saw advertised on television (Byrd-Bredbenner & Grasso, 2000; United States Department of Health & Human Services, 2002). A third conceptual theory proved that advertising may contribute to energy imbalance and weight gain, facts demonstrated by the Kaiser Family Foundation. The foundation research included a survey of 3-year olds whose caloric in

take increased, when their parents bought the foods that were advertisement subjects (Kaiser Family Foundation, 2004).

In contrast, those who disagree that advertising is a factor in childhood obesity point to Sweden, where the government has banned all food advertising for over a decade. The percentage of overweight children 10 years old in Sweden doubled from 9% to 18% from 1971 to 1995. Sweden's most recent (year 2006) data estimates that more than 30% of Swedish children are overweight (Neovius, Janson, & Rossner, 2006). In Quebec, where the Canadian government has prohibited advertising to children since 1980, the obesity weight for boys has almost doubled from 15% in 1981 to almost 29% in 1996. For girls, the percentage jumped from 15% to 23.6% during that period. Moreover, four years later, the obesity rates had raised still higher (Trembley & Douglas, 2000). Belgians believe advertising to children is morally and ethically unacceptable, because children have problems separating the commercial from the program. Belgians have banned advertising during children's programs as well as in the five minutes before and after the broadcasts (Story & French, 2004a). Apparently, the obesity rates for that European country are not available.

Questions Asked about Television Viewing and Obesity

Thomas N. Robinson, MD and MPH, at Stanford University's Department of Pediatrics and Center for Research in Disease Prevention, takes up questions that medical authorities now study. One query is, "Does television viewing predict future obesity?" The answer, Dr. Robinson has observed, can only be determined in experimental trials, which he concedes are difficult to do. Moreover, he poses the following question, "Will reducing television viewing prevent obesity?" He answers that when parents limit chil-

dren's television viewing time and encourage more exercise, children lose more weight (Robinson, 2007). Indeed, television advertising, experts have agreed, does encourage consumption of cereals, junk foods (such as candy), beverages high in sugar, and foods high in fat and sodium, such as chips and hamburgers (United States Department of Human Services, 2002).

Although physical evidence of BMI for those on or above the 95th percentile of obesity does show a relationship between the number of hours of television viewed, researchers still are investigating the process to determine the reason. Evidence, for instance, shows that genetic makeup plays a role in obesity, when it couples with behavioral and environmental factors. Evidence from twins, adoption, and family studies strongly suggests that biological relatives exhibit similarities in maintaining body weight with heredity contributing between 5 and 40% of the risk for obesity. Other studies show that genetic influences determine 50-70 % of a person's BMI and degree of fatness, and that there is a 50%-75 % chance that a child will be overweight, if both parents are obese and a 25%-50 % chance if just one parent is obese. Genetic susceptibility to obesity in most cases is due to multiple genes that interact with environmental and behavioral factors. Exercise and diet also play a role in this complex subject (United States Department of Human Services, 2002).

Progress Made by Some Manufacturers

In December 2006, the 10 largest food companies –those that provided two-thirds of all food advertising to children under age 12– pledged to follow the CARU guidelines. They were Hershey, Kraft, Mars, Kellogg, PepsiCo, Coca-Cola, General Mills, Cadbury Schweppes, Unilever, and Campbell. A Federal Trade Commission Obesity Webcast on

July 18, 2007 began by noting that nearly one in five children are overweight. The Webcast also observed that childhood heroes, like Mickey Mouse, Sponge Bob, Cookie Monster, and Shrek, each urged children to eat meals that are more healthful. Cookie Monster said that cookies are a “sometimes” food, and Shrek urged children to go out and play an hour a day. Cadbury, Campbell’s Soup, Coca-Cola, Kellogg, General Mills, Hershey, Kraft Foods, Mars, McDonald’s, and PepsiCo have pledged to change their message concerning what children should be consuming. Kellogg was one of ten companies that committed to direct 100% of its advertising toward children to being consistent with federal nutritional standards (Federal Trade Commission Childhood Obesity Webcast, 2007).

The company made the commitment, no doubt, because it felt threatened in June 2007 by a promised lawsuit. To head off legal problems, the firm agreed either to reconstitute or not advertise Pop Tarts, Shrek, and Cocoa Krispies breakfast cereals, for each contained more sugar than allowed by the new government standard of 12g. of sugar, 2g. of saturated fat, and no more than 230mg. of sodium per 200-calories serving. Pop Tarts, has 17g. of sugar, Shrek, has 15g, and Cocoa Krispies has 15g. However, the firm knew that it could promote Frosted Flakes and Rice Krispies with Real Strawberries, because those foods met the federal requirements (Martin, 2007b).

Various firms pledged to meet the federal standards in their advertising to children. Kellogg stated that it plans to step up its efforts to meet the guidelines by marketing its products in untraditional ways, such as in-store promotions, special packaging, various events, the Internet, and product placement in videogames, movies, and television (Latino Marketing, 2008; Wentz, 2007). Observers expect that people will change their

eating habits in small increments. PepsiCo is also committed to making changes tied to USDA/FDA standards. Cadbury only advertises one product to children, Bubblicious Gum, which it promised to cease promoting to youngsters in March, or, alternatively, the company will devote at least 50% of its media messages to a healthful product. Coca-Cola is affirming its long-standing tradition not to advertise to children under age 12. Hershey also adopted the custom, a policy that started in January 2007. Mars which also has announced that it will not market to children under age 12, now puts out a snack line that follows government nutritional standards. The product will appear in spring 2008. Kraft is collaborating with Nickelodeon to promote a frozen vegetable line using Dora the Explorer (Federal Trade Commission Children Obesity Website, 2007).

CARU Expands Advisory Board

To attempt to make certain that advertisers meet the CARU guidelines for proper nutrients in 2007, CARU expanded its advisory board. As a result, the board now requires advertisers to formulate ads that do not encourage children to think that eating a product will make them popular. Additionally, the FTC has added an online complaint opportunity that has generated consumer input. Because food manufacturers and the food industry generally have increased their monetary contributions to CARU, the board now pre-screens ads more frequently. It states, additionally, that it is better able to discover questionable ads, identify message problems, and complete its work earlier than before. Advertisers now tie serving size messages, for instance, to product nutrients. Today, the CARU guidelines require companies to submit their compliance reports, a policy that enables CARU to work with advertisers on the subject (Federal Trade Commission Childhood Obesity Webcast, 2007a).

Advertisers Need to Consider the Potential of the Hispanic Market

Although there are 100 Hispanic advertising agencies (the top 26 increased their advertising budgets by double-digits for 2006), some firms still are not spending money in the Hispanic market, especially in the food categories, according to *Advertising Age's* annual guide to Hispanic marketing. The present study validates the observation made by Carl Kravitz, chairman of the American Hispanic Advertising Association, that while Hispanics make up 15% of the United States' population, there is a paucity of food advertisers in that market.

Kravitz believes that advertisers should make budgets that reflect the realities of the Hispanic market. In 1996, 40 Hispanic advertising agencies held a groundbreaking meeting in Dallas. While they all had been vying for the small bit of advertising directed to the Hispanic market, they also felt that mainstream advertisers should realize that the agencies had much to share and, as a result, deserved more attention from firms (Riley, 2000a). One of the growing trends in today's advertising is that the general market agencies are buying some of the larger Hispanic marketing organizations.

The situation follows earlier activity, in 1996, when the Association of Hispanic Advertising Agencies conducted research to determine how much the top advertisers spent in the Hispanic market in prior years. Although Hispanics possessed a buying power of \$675 billion in 2004, most top advertisers were spending, instead, billions of dollars to reach the mainstream market. Except for PepsiCo, Sears Roebuck, McDonald's, and the government, heavy advertisers were failing to invest in the Hispanic market (Machada, 2004b). In 2005, Hispanic purchasing power in the United States posted an annual growth of 7.7%.

Food Advertising

Food firms are the second largest group of advertisers in the country. (The auto industry is the largest.) The industry buys television, newspaper, magazine, and radio time, and billboards, because food composes up to 12.5% of consumer purchases. Because there is much competition and food is a repeat-purchase item, advertisers are wary of consumers who can change brands and often do. Advertisers spend over \$1 billion, the greater part of which they spend on television ads, to reach children. Companies spent \$65,373,300 advertising their products on television in 2006 (\$22,879,200 on network television, \$17,233,700 on spot television, \$16,746,000 on cable television, and \$4,279,300 on Spanish-language television). They used a final \$4,235,100 for national syndication (TNS Media Intelligence, 2007). Fifty percent of advertising promotes food, but advertisers spend most of the money on messages that encourage consumers to purchase junk food and sugary beverages (Story & French, 2003a; TNS Intelligence, 2007; *Beverage Marketing*, 2007; *Advertising Age*, 2006).

Advertisers expended for food products \$7.3 billion in 1999, only \$1.9 billion of which they spent in the entire Hispanic market (Story & French, 2004; Terry-Azios, 2000). In 1997, advertisers in the United States used the following sums to promote various foods: \$792 million for breakfast cereals, \$765 million for candy and gum, \$549 million for soft drinks, and \$330 million for snacks. Firms spent a total of \$1 billion advertising confectionary and snacks (Story & French, 2003).

Youngsters ages 2-4 view two hours of television daily, an amount of time that increases to more than 3.5 hours in grade school before dropping off to 2.75 hours in later adolescence. Minority and low-income children and youth have even greater exposure to

food ads. Fifty percent of the estimated 360,000 ads that United States children will have watched by the time that they graduate from high school are predominately for food. A child may see as many as one food commercial every five minutes of television and may view as many as three hours of such commercials each week. Young children grow up with the brands that they see on television. Research conducted by Story & French during 52.5 hours of Saturday morning children programming revealed 564 food advertisements (57% of all ads). Of the ads, 44% promoted food from the fats and sweets groups (cookies, soft drinks, chips, cakes). Another 11% marketed fast foods. Cereals with the highest sugar content led the way, and the cereal companies did not show fruit or vegetables in their ads (Story & French, 2003). Television advertising for food has quadrupled from 29 hours to nearly 52 hours weekly. More than a third of television ads that children under age 12 view are for candy and snacks, 28% are for cereal, and 10% are for fast foods, according to a new study from the Kaiser Family Foundation. Children, ages 2-7, on average, watch 748 hours of television yearly (Kaiser Foundation, 2004b).

Children Ages 8-12 Watch the Most Television

Children 8-12 watch television more than 1,275 hours each year or about 3.5 hours daily. Walter Ganz, an Indiana University professor who headed the Kaiser study, said that both most advertisements and public service messages that he examined appeared on ABC, CBS, NBC, Fox, WB, UPN, ABC Family, BET, The Cartoon Network, and "MTV." Most television advertisements children and teens see, according to Ganz, are for fast foods. Nutritionists, watchdog groups, and government agencies argue that people should consume these fast foods moderation (Teinowitz, 2007).

One result of the Kaiser study demonstrated that children ages 2-7 see the fewest television ads, while ages 8-12 view the most. Younger children see the smallest number of advertisements, because they watch PBS and cable channels, where, ostensibly, there are no advertisements, just “support messages” from private firms. The estimated numbers of food advertisements that children may look at yearly are as follows: 13,904 for 2-7-year olds, 30,155 for 8-12-year olds, and 28,655 for children ages 13-17. Children ages 2-7 may see 12 food advertisements each day, those 8-12 may view 21, and children 13-17 could watch 17. The study also showed that children see relatively few fitness and nutrition messages. The research further pointed out that those ages 2-12 see one public service announcement (PSA) every two to three days, while youngsters ages 13-17 watch them even fewer times each week (Teinowitz, 2006).

Evidence Linked TV Viewing to Obesity and Inactivity

Other evidence links television viewing with obesity and inactivity. In the National Health and Nutrition Examination (NHANE) study conducted during the period 1988-1994, the researchers discovered that of the 4,063 Mexican-American children ages 8-19 who participated in the study, 20% involved themselves in vigorous activity only once or twice each week. According to a cross-study, the situation potentially posed a health threat (Andersen, Crespo, & Bartlett, 1998). Overall, 80% of American children, other than Mexican-Americans, reported three or more vigorous activities each week, although rates were lowest among non-Hispanic Blacks. Overall, 26% of American youngsters watched four or more hours of television, and 67% watched at least two hours of television per day. Boys and girls who viewed four or more hours had greater body fat and body mass index levels than did children who watched less than two hours.

The finding is similar to research conducted by the Institute of Medicine (IoM) on Child Obesity and Inactivity (Krisberg, 2004b). Organizations such as Azteca America, Inc., and the Advertising Council, currently are attempting to encourage Hispanic children to exercise more. Azteca America is the fastest-growing Hispanic network in the United States. It is a subsidiary of TV Azteca, one of the two largest Spanish television production companies in the world. It broadcasts in 55 United States markets. Azteca America paired with Dreamworks Animation SKG and the Ad Council for the United States Department of Health & Human Services in February 2007 to develop a Public Service Announcement campaign to combat child obesity in the Hispanic community. With the messages, “Levantate, diviertete y vamos a jugar!” and “Levantate y jugar una hora el dia!” (“Get up and be a player!” and “Get up and play an hour a day!”), the campaign urges taking small steps to help reduce obesity (Forbes, 2007).

Food promoters, the second largest advertisers in the country, spend more than \$1 billion yearly on media advertising to children, the majority of the money directed to television spots. Advertisers spend 50% of that sum on foods, the preponderance of which focuses upon junk food and sugary beverages. Advertisers may target children with 360 30-minute commercials during one week. Because grocery stores in poorer neighborhoods do not offer many fruits and vegetables, Hispanic families eat less nutritious foods, consuming, instead, processed foods that have too high fat and sodium. The section below discusses recommendations aimed at curbing obesity.

Medical Recommendations to Curb Obesity

The Institute of Medicine in 2004 requested Congress to take steps to end childhood obesity. The agency’s report stated that the government should take the lead in a

sustained effort to support policies and programs that reduce childhood obesity. It recommended that food industry leaders create and promote products that encourage healthful eating and regular exercise. Items in the report affecting the food and beverage industry included a request for action by the United States Department of Health & Human Services to develop guidelines to control advertising directed at children. The IoM also called upon the United States Federal Trade Commission (FTC) to monitor compliance. Currently, the food industry voluntarily monitors and adheres to its own regulations, a situation that critics argue are not working (Krisberg, 2004b).

FTC Responds

In order to regulate junk food advertising spending, in October 2006 the FTC asked 50 major food industry advertisers and manufacturers to present their advertising budgets to the government. Prior making the request, the FTC asked questions about expenditures and budgeting. The commission warned the advertising industry that Washington had the authority to force advertisers to produce the information (Edwards, 2006). In 1980, however, Congress stripped the FTC of its power to regulate food advertisements. With child obesity climbing to more than 35% in 2007, and with 45% of Hispanics overweight or at risk for obesity, though, a new Congress may reinstitute the FTC restrictions (Goldstein, 2006a).

Companies Back CARU Guidelines

Ten major food and beverage companies are currently backing voluntary guidelines to promote healthier foods or lifestyles. The firms who pledged to help alleviate the obesity crisis include Cadbury Schweppes, Campbell's Soup, Coca-Cola, General Mills, Hershey, Kellogg, Kraft Foods, PepsiCo, Unilever, and McDonald's. Those businesses

account for over two-thirds of the advertising in the food and beverage industry, spending \$6.1 billion on advertisements annually (Edwards, 2006).

The food and beverage brands currently targeting the Hispanic market include the following firms and, where applicable, their cereals, candy bars, drinks, and other foods (Liesse, 1993; Nuiry, 1996; Duggan, 1998; Riley, 2000b; Machado, 2004b):

Cereals

General Mills: Honey Nuts, Kix, Lucky Charms, Cheerios, Multi Grain Cheerios

Kellogg Co.: Special K, Frosted Flakes, Pop Tarts

Candy bars

Mars Co.: M&M's, Twix

The Hershey Co.: 38 candy bars

Cadbury Schweppes: Carmello

Sodas

Cadbury Schweppes Co.: Dr. Pepper, Seven Up

PepsiCo: Pepsi, Mountain Dew, Sierra Mist

Coca-Cola Co.: Coca-Cola

Other food

Kraft Foods: Kraft Singles

McDonald's Co.: Apple Dippers, Nuggets, milk

Of the firms listed, McDonald's has said that it will continue to focus upon Chicken Nuggets, Apple Dippers, and milk, which the company says already adhere to healthful guidelines. Hershey, the nation's largest candy-maker, has stated that it will cease to advertise to children under age 12 (Brubaker, 2006).

The Threatened Case against Kellogg and the Results

Ten food manufacturers pledged in December 2006 not to advertise to children under age 12 or to advertise only food that meets USDA/FDA standards. The pledge came 16 months after the Center for Science in the Public Interest, the Campaign for a Commercial-Free Childhood, and two Massachusetts parents threatened to bring the lawsuit against Viacom and Kellogg. In view of the situation, Kellogg declared on June 14, 2007 that it would phase out advertising to children under age 12, unless the food that it promotes to children meets federal requirements regarding calories, sugar, and fat (Martin, 2007b).

Kellogg also stated that it would cease to use branded licensed characters or branded toys to promote foods, unless the products met the federal nutritional guidelines. David Macay, chief executive of Kellogg, said that in a year and half the company would reconstitute those products, or the firm no longer would advertise them to children. If the firm is unable to reconstitute the products, the executive said further, the concern would faze them out or advertise them to an older audience. The voluntary changes would affect Fruit Loops, Apple Jacks, Pop Tarts, and regular Rice Krispies, but the corporation would allow Frosted Flakes and Rice Krispies with Real Strawberries to remain as they were. Under the new guidelines, food advertised on television, radio, Web sites, and in print, each medium of which caters to an audience that is 50% or more children under age 12, will have to meet the new nutrition guidelines. Kellogg already refrains from advertising to children under age six. The guidelines also affect children ages 6-11. The new standard allows one serving of food to have no more than 200 calories and no more than 2g. of saturated fat. Kellogg will cease advertising Cocoa Krispies, because the product

has 14g. of sugar. Shrek cereal with 16g. of sugar and Pop Tarts with 17g. of sugar, Kellogg announced, may be reconstituted, because they do not meet the standards. Both contain too much sugar per serving and use licensed characters (Martin, 2007b).

Table 3 below compares the total amount of revenue that firms in this study earned and the sums that they spent to advertise their products in 2006.

Table 3 Television advertisers

Company	Total revenue	Amounts spent on advertising	Sources
Kellogg	\$70 million	\$1.1 million	TNS Media Intelligence; Beverages Marketing Corporation, 2007; <i>Advertising Age</i> , 2006
Pepsicola	\$9.5 billion	\$1.4 million	
Coca-Cola	\$7 billion	\$703 million	
Cadbury Beverages	\$4.5 billion	\$416 million	
Hershey	\$5.9 billion	\$924 million	Hershey <i>Annual Report</i> , 2006
Cadbury Schweppes	\$14.7 million	\$1.3 million	<i>Advertising Age</i> , 2006; Cadbury Schweppes <i>Annual Report</i> , 2006; <i>Advertising Industry Voluntary Food and Beverage Industries Release Guidelines</i> , 2006
General Mills	\$3.1 billion	\$800 million	General Mills <i>Annual Report</i> , 2006

The advertisers together earned more than \$65 billion in 2006, with more than \$4.2 billion gained from promoting their products on Spanish language television.

The food and beverage industry released guidelines, as the writer has pointed out, in December 2006 in response to the government's October 2006 request for advertising budgets. CARU stated that its rules are "merely designed to provide additional guidance to assist advertisers and to help them deal sensitively and honestly with children" under age 12. Under the direction of Joan Z. Bernstein, a former FTC director of consumer protection, now working for the CBBBs, the children's initiative represents an attempt to

promote to children under age 12 a healthful lifestyle based upon proper dietary choices (Edwards, 2006b; Council of Better Business Bureaus, 2005b).

The FDA defined “healthy foods” in its guidelines as those that have met USDA/FDA criteria for “free,” “low,” or “reduced” calories, total fat, saturated fat, sodium, and/or sugar (USDA/FDA, 2005). Products representing portion-control options, such as 100-calorie packs, the guidelines encourage. The new CARU voluntary advertising initiative will monitor company commitments aimed at complying with the government’s standards in the use to advertising materials, product information, and media impression data. Another important component of the CARU guidelines is that firms must design “healthy lifestyle messages” that appeal to children. “Compliance” means firms in their advertisements should encourage physical activity and make good their promise to encourage “dietary choices” which are consistent with the USDA/FDA and MyPyramid guidelines (Council of Better Business Bureaus, 2005b).

The voluntary advertising guidelines do not take the child obesity issue as far as does Britain, which newly has banned advertising ordinary food and junk food products that are high in fat, salt, and sugar on any television show with a higher than average under age 16 viewer audience at all times of day and night and on all channels. The law, which went into effect in January 2007, will be upheld by the British government agency and a media regulator, Ofcom (Edwards, 2006).

England’s Food Standards

The Food Standards Agency of England in 2007 was the arm of the Food for Nutritional Uses, a governmental department that maintains the previous year’s standards and revises or amends food standards each year in England (Food Standards Agency,

2007). The agency recommended the following:

- Eat starchy foods, such as whole grains, rice, pasta, and potatoes.
- Eat five portions daily of a variety of fruits and vegetables.
- Eat two portions of fish weekly (like salmon, with omega 3 fatty acid).
- Cut down on saturated fats/sugar (do not eat more than 3g. of fat per 100g. of food; 10g. of sugar per 100g. of food is a lot; take in only 2g. of sugar or less per 100g. serving)
- Try not to eat processed food, because it contains too much salt (0.1g. or less per 100g. is desirable).
- Stay active and drink 6-8 glasses of water daily.

As one may conclude, the English recommendations for consuming food are very similar to those of the USDA/FDA and MyPyramid guidelines. Americans who are skeptical that companies will advertise healthful food and lifestyles for children include Michael Jacobson, executive director of the Center for Science in the Public Interest. He compared the advertising industry's lifestyle message to Ronald McDonald pedaling a bike while peddling junk food (Goldstein 2006b).

Conceptual Theories

There are three main conceptual theories relating to how increased television watching leads to obesity and Type 2 Diabetes, a disease for which Hispanics have a genetic link. Forty-five percent of youth in the Hispanic community are overweight or obese. The first theory is that television viewing will displace physical activity, reducing energy expenditure. Television watching also increases junk food consumption, a situation that results in lower energy intake. Cued by commercials, those who watched more television possessed unhealthful eating patterns (Hu, 2003). Studies show that Hispanic

children do not exercise as much as children do in other populations (Andersen, *et al*). A second conceptual theory tries to demonstrate that both younger and older children will pester their parents for foods that they see on television (Byrd-Bredbenner & Grasso, 2000; United States Department of Health & Human Services, 2002). The third conceptual theory posits that advertising influences diet and other food choices, and that the situation may contribute to energy imbalance and weight gain, as evidenced by the Kaiser Family Foundation's 2004 study. After watching television, children often requested that their parents supply them with the food that the children saw advertised. Studies also show correlations among foods advertised on television, the amount of time children spend watching television, and children's requests food brands at the grocery (Kaiser Family Foundation, 2004).

Hispanics comprise part of the larger obesity epidemic in the United States that has intensified, since the percentage of American children who are overweight or obese rose from 5% in 1983 (Dietz, 1983b) to 29% in 2000 (United States Department of Health & Human Services, 2002). In 2004, though, studies revealed that more than 35% of the nation's children were overweight or obese (Hedley, Ogden, Johnson, Carroll, Curtin, & Flegal, 2004; Lobstein & Jackson-Leach, 2007b). Because the government projects that Hispanics will be the largest minority in the country by 2050, the health of this segment of the population is important. With Hispanic present diet practices, 45% of Hispanic youth or more than 47,790,000 young people are at risk for diabetes, hypertension, and orthopedic problems. Because the cost for pediatric obesity hospital stays has escalated from \$43 million to \$127 million per year, the present study may prompt con

cerned advertisers to air commercials that encourage Hispanics to practice healthful lifestyles by making proper dietary choices (Lobstein & Jackson-Leach, 2007).

The writer asked a series of questions concerning whether advertisers followed the CARU guidelines aimed at promoting “healthy dietary choices” and “healthy lifestyles” among Hispanic children.

The Research Questions

- Did advertisers devote at least half their television, radio, print, and Internet advertising to Hispanic children under age 12 in a way that promoted “healthier dietary Choices,” and/or did the messages encourage good nutrition and/or “healthy lifestyles?”
- Did advertisers promote to Hispanic children “healthy dietary choices” and “lifestyles” that included exercising? Advertisers’ pledges to promote healthful lifestyles had to coincide with established scientific, government standards, such as the USDA/FDA Dietary guidelines and the ones in MyPyramid. MyPyramid is the USDA food guidance system.
- Did advertisers in the Hispanic market refrain from product placement for food and beverages in editorial and entertainment content?
- Did advertisers in the Hispanic market reduce the use of third-party licensed characters in advertising, a practice that did not meet the guidelines?
- Did advertisers in the Hispanic market follow a guideline review process that allowed a consumer the initiative to take action concerning advertising that he believed was “unfair” or “misleading,” because it blurred the message with editorial content?
- Did advertisers in the Hispanic market promote products in interactive games that encouraged healthful dietary choices, and did the firms incorporate healthful lifestyle

messages into the games, thus employing online interactive game commercial messages in a manner that people sometimes describe as advergaming? The researcher did not explore such a guideline for healthful lifestyle, because Hispanics have fewer televisions and computers per household than other groups, and, consequently, there are not enough suitable statistics on the subject (Clemens, 2006b).

Today's Adults and Children Face Similar Health Threats

In June 2007, health experts and others interested in the healthful lifestyle conferred at a Healthier America Summit in Washington, D.C. to discuss ideas that would promote a healthier America and to exchange views about how people and the government should cope with disasters, such as Hurricane Katrina and a possible pandemic flu that might start in China. While the conferees discussed bioterrorism, as well, they also addressed obesity, since healthy adults often produce children of normal weight (Segal, 2007).

Some key participants in the Summit included Jo Ivey Boufford, MD, president of the New York Academy of Medicine, Donna Chiffriller, vice president of Corporate Benefits of Verizon, Robert Greczyn, president and CEO of BlueCross and BlueShield of North Carolina, and Cynthia Sloat, director of Health and Welfare Benefits of PepsiCo (Healthier America Summit, 2007).

Among the Summit's conclusions were the observations that although the United States was spending more than \$2 trillion annually on health care –more than any other nation– tens of millions suffer every day from preventable diseases. Baby Boomers, those attending stated, may be the first generation to live less healthful lives than did their parents. The diseases that the “Boomers” must face, because they will live longer than

people have done before, include cancer, diabetes, and Alzheimer's (Healthier America Summit, 2007).

The fourth annual "F as in Fat, How Obesity Policies are Failing in America, 2007" report contained similar observations. The report revealed that California adults, 22.7% obese, were the 36th most heavy in the country. California youth (10-17) were the 32nd most overweight, at 13.2%. The rate had remained consistent for California, the report observed. Twenty-three percent of California adults had reported that they did not engage in any physical activity, while the national average was 22%. In 2007, Mississippi led the country in the adult obesity category for the third year straight year. Its obesity rate of 30.6 % made it the first state to reach such a high degree of overweight. Ten of the 15 states with advanced degrees of obesity are located in the South. Colorado, in the West, was again, in 2007, the leanest state, its obesity rate having increased only from 15.6% to 16.9%. The report also noted that children in Washington, D.C. had obesity rates of 22.9% for children ages 10-18 compared to Utah's low 8.5%. Both the conference and the report concluded that America is not slimming down, nor is it practicing a healthful regime to do so (How Obesity Policies are Failing in America, 2007).

CHAPTER III

Method

There are 5,985,000 Hispanic children under age 18 in the United States, youth who watch nearly 15 hours of television each week compared to Black children's 18 hours and White children's 13 hours, according to researchers at Columbia University and Bassett Healthcare in New York City. Concerning Chinese-Americans, fourth, eighth and twelfth graders are likely or more likely to watch four or more hours of television each day (Thernstrom & Thernstrom, 2003). Some theorize that television viewing may be one cause of 45% of Hispanic children being overweight compared to 35% of Black children and 33% of White children (Childhood Weight Control Program, 2002). A contributing factor is that the FCC does not yet regulate Spanish-language television in the \$4.2 billion Hispanic advertising market (TNS MediaIntelligence, 2007). In 2006, however, the FCC formed a commission to investigate what advertisers were promoting in that market.

Coding Guidelines

As a first coding step, the researcher coded and compared the total fat, saturated fat, other specific fats, sodium, sugars, total carbohydrates, cholesterol, and protein amounts in certain sodas, cereals, and candy bars to the USDA/FDA guidelines for a 2,000-calorie diet.

An example, illustrated in Table 4 below, of an item that the writer coded is a Hershey 1.55oz.-milk chocolate candy bar.

Table 4 Constituents of a 1.55-oz., 230-calorie Hershey bar compared to USDA Guidelines: an example of the coding employed in this investigation

Constituent	Amount contained in a Hershey bar	Serving Size	Percent of serving size	USDA/FDA DV guidelines, 2005
Total Fat	13g.	Entire bar	20%	Less than 65g. for children and adolescents; for ages 4-18: 25g.-35g.
Saturated Fat	9g.	Entire bar	45%	Less than 20g.
Cholesterol	10mg.	Entire bar	10%	Less than 300g.
Sodium	40mg.	Entire bar	3%	Less than 2,400
Transfat	-0-	Entire bar	-0-	Less than 5g.
Total Carbohydrates	25g.	Entire bar	8%	300g.
Dietary Fiber	1g.	Entire bar	4%	14g. grams based upon 11.5g. of fiber per 1,000 calories
Sugar	22g.	Entire bar	Not given	16g.
Protein	3g.	Entire bar	Not given	50g.

Hershey claimed before December of 2006 that it would not advertise its brand to children ages 6-12.

The first step also noted if advertisers promoted “healthy foods,” that is, products that are consistent with the USDA/FDA dietary guidelines and MyPyramid. The FDA has defined “healthy foods” as those that meet the USDA/FDA criteria for “free,” “low” or “reduced” calories, fats, sodium, and added sugars. The USDA/FDA and MyPyramid diets emphasize fruits, vegetables, whole grains, fat-free milk, lean meats, poultry, fish,

beans, eggs, and nuts. MyPyramid for Kids also emphasizes physical activities, such as running, swimming, and biking (USDA, 2005).

To ascertain if advertisers complied in their commercials with federal healthful dietary choices, the researcher coded and compared specific cereals, sodas, and candy bars. In such fashion, the writer hoped to determine whether the messages broadcast on Spanish-language television showed any evidence of promoting foods, such as fruits and vegetables, by urging children to eat fruits, such as oranges and apples, and vegetables, such as carrots and tomatoes. The writer also compiled a list of brand names that promoted “healthy dietary choices” and identified those advertisers that displayed fruit or vegetables, such as a child eating an apple or orange, in their commercials. MyPyramid and the USDA/FDA food guide recommend 2 cups of fruit and 2 ½ cups of vegetables per day for a 2,000-calorie diet.

The second step involved coding and comparing each brand for gender and activity: no activity (sitting), very active (running, climbing stairs), and somewhat active (walking). One of the CARU guidelines promotes “healthy lifestyles” of which exercise is a part. MyPyramid recommends 30 minutes of daily exercise (USDA 2005).

Steps three through five took up advertising to children in more detail. The third step, for instance, determined the extent to which advertisers followed CARU ethics guidelines, such as refraining from food product placement in editorial and entertainment content. The fourth step took up which advertisers supported the CARU guidelines and those that did not. The fifth step determined the ratio of food advertisements aimed at children and all other promotions that focused upon youngsters, and it coded and com

pared words, music, or characters in various ads, noting if a message employed one or more of each, as well as other promotional techniques.

The present study initially coded the following 10 cereals, 19 candy bars, and 4 sodas:

Cereals: Kix, Total, Lucky Charms, Honey Nut, Multigrain Cheerios, Frosted Flakes, Fruit Loops, Cocoa Krispies, Special K

Candy Bars: Milk Chocolate, Jolly Rancher, Hershey's Kisses, Skor, Heath, Fast Break, Peanut Butter Cups, Take Five, Cookies 'n' Creme, Good & Plenty, York, Mounds, Twizzlers, Dairy Milk, Roast Almond, Fruit & Nut, Carmello

Sodas: Coca-Cola, Pepsi, Mountain Dew, Dr. Pepper, 7Up

The writer coded and compared the percentage of fat, sugar, total carbohydrates, sodium, total fat, saturated fat, cholesterol, sugars, dietary fiber, and protein in each cereal, candy bar, and soda that appeared in television advertising to ascertain if each met the recommended USDA/FDA and MyPyramid guidelines for a 2,000-calorie diet for adults and children over four years old. The food products also had to comply with the recommended USDA/FDA daily value percentages.

Study Involved Watching Commercials

Because advertising is seasonal, the researcher did not have previous notice of programming, a situation that increased the possibility that there would be either fewer or more advertisers in the Hispanic market. In addition, other advertisers may have assigned advertising revenues to the Hispanic market following the December 2006 release of the CARU guidelines.

The study involved watching approximately 170 hours, during seven weeks, of Spanish-language television commercials, that is, viewing 122 advertisements in November 2007 and 140 in January 2008 from 8 a.m.-11:30 p.m., Saturdays and Sundays, and 10 a.m.-1:30 p.m. and 3-5:30 p.m. Monday through Friday on Galavision, (Channel 66), Univision (Channel 14), and Telefutura (Channel 20). Many ads appeared during soccer matches.

The stations devoted Saturdays and Sundays to cartoons and animal programs from 8-11 a.m. and to a music program, “PepsiMusica,” on Saturdays 11-11:30 a.m. in November 2007. Stations did not show “PepsiMusica” in January 2008. Sometimes stations scheduled soccer or Futbol de Liga Mexicana 3-5 p.m. or 10 a.m.-1:30 p.m. The writer selected soccer programming to review, because most Hispanics watch it, making it popular. The researcher believed that children ages 6-12 would make up part of the soccer audience. There are also fewer children’s programs on Spanish-language television than on mainstream stations. The writer watched cereal, candy, and soda commercials and analyzed the data by content analysis.

Quantitative Method Used

One may use the quantitative method to provide systematic results (Baxter & Babbie, 2004). The researcher coded and compared six beverages and 10 candy bars for their calories, sugar, sodium, fat, protein, calories, and carbohydrates, in accordance with *Dietary Guidelines for Americans, 2005*. The United States Department of Health & Human Services and the USDA published such guidelines jointly every five years since 1980. The guidelines provide authoritative advice for one to impart to children two years old and older about how proper dietary habits promote good health and reduce one’s risk

for developing major chronic diseases. The guidelines serve as the basis for federal food and nutrition education programs (Dietary Guidelines for Americans).

In 2005, the following candy bars, listed in Table 5 below, exceeded the recommended USDA/FDA criterion of 16g. of sugars.

Table 5 Candy bars that exceeded USDA/FDA sugar content standards

Manufacturer	Candy bar	Number of grams of sugar
Hershey	Reese's Peanut Butter Cups	20
Hershey	Cookies 'n' Crème	22
Hershey	Skor	24
Hershey	Kit Kat	22
Hershey	Take Five	18
Hershey	Jolly Rancher	22
Hershey	Good & Plenty	21
Cadbury Schweppes	Roast Almond	18
Cadbury Schweppes	Dairy Milk	21
Cadbury Schweppes	Fruit & Nut	22

Almost all the listed candy bars contained half their calories in fat. Hershey makes Take 5, Cookies 'n' Crème, and Reese's Fast Break with high fructose corn syrup, an ingredient that may cause weight gain due to the manner in which person metabolizes the substance (Nielsen, Popkin, 2004).

Content Analysis

The investigator employed content analysis to ascertain if voluntary CARU guidelines met USDA/FDA standards, because one needed a numerical method to examine the Spanish-language television commercials. Ten of the largest food advertisers, such as General Foods, Kellogg, PepsiCo, and Coca Cola, responded promptly after the government's October 2006 request for their advertising budgets. Candy manufacturers, such as Hershey and Cadbury, responded by the deadline. Originally, the government asked 50

food manufacturers to reveal their food budgets and criteria for placing a specific amount of sugar and fat, for example, in their products. Only ten of the firms responded immediately.

The researcher employed coding sheets to log certain products advertised in the Hispanic market. One noted the genders for children ages 6-12 when recording the fat, sugar, and protein that children consumed in specific products, and then the writer compared the results to UDSA/FDA standards. Another coding category took up the percentage of advertisers that followed the voluntary guidelines, that is, how many advertisers sent a healthful message, such as that a person should eat more fruits and vegetables. To determine if a company also promoted exercise in its commercials, the researcher noted if the advertiser encouraged active, very active, or somewhat active physical activity in the message. The amount of exercise and the healthful quality of the commercial, the researcher determined, by reviewing images and their accompanying speech, that is, one looked for commercials that contained a healthful message, such as a child riding a bicycle.

CHAPTER IV

Results

In October 2006, the government asked the 50 top food advertisers in the United States to submit their advertising budgets to determine if firms promoted healthful dietary and lifestyle choices. Instead of revealing their budgets, the advertisers allowed CARU to submit guidelines that advertisers were to follow. The investigator, as a result, determined with eight questions and answers how closely advertisers complied with the CARU guidelines:

- Did more advertisers follow the CARU guidelines than the original ten that initially committed to them?

— No other food advertisers pledged after December 2006, the date that the government released its guidelines. As of January 2008, no other food advertisers gave pledges for healthful food consumption.

- Did advertisers direct at least half their advertising to children under age 12 on television, radio, print, and Internet to promote healthier dietary choices and give messages that encourage good nutrition or healthful lifestyles?

— Kellogg promised to devote at least half its advertising to promote healthful dietary choices. The firm promised to set up a mobile expedition to at least 125 locations, a tour aimed at addressing key healthful concerns in the Latino community. The company planned to set up booths in parking lots adjacent to markets and, among other activities, to give \$1 coupon for produce with the purchase of every two Kellogg's products. The company also expected to distribute free magazines, put out by the Meredith Corporation, that contain food tips and special information about Hispanic health problems (Hispanic

Trending, 2008). The firm also decided to increase their advertising to Hispanics more than 60% over their current expenditures (Posts from Latino Marketing, 2008). No doubt, Kellogg decided on such a course, because the firm felt threatened by a potential lawsuit over the too large amounts of deleterious constituents in products that it was marketing to children. Hershey did not devote any marketing efforts to children under age 12.

- Did advertisers promote “healthy dietary choices” and “healthy lifestyles” that included exercising, and did the attempts coincide with established scientific and/or government standards, such as those of the USDA/FDA?

— Kellogg is attempting to meet federal standards by reducing its cereals fat and sugar content. In addition to lowering sugars from 14g. to 12g. in Cocoa Krispies, it is reducing the amount of sugars in Shrek from 15g. to 12g.

— Sunny D, which did not take the pledge, showed children at play at baseball, a situation that demonstrated high activity. The drink, however, contained 21g. of sugars, when 12g. for a 200-calorie serving is allowed in the USDA/FDA standards. An 8-oz. serving of Sunny D also has 170mg. of sodium and 23g. of carbohydrates, but the amounts are acceptable for its 90-calorie can.

- To what extent have certain companies met the government standards?

— PepsiCo and Coca Cola pledged not to advertise to children under age 12, but the firms broadcast commercials on Saturday and Sunday mornings, when youngsters that age watch television. In some instances, PepsiCo with its Sierra Mist and Pepsi, and Coca-Cola with Coke did not meet the sugars standard. Instead of 16g. of sugar for a 2,000-calorie diet, Pepsi contained 28g., Sierra Mist 26g., and Coca-Cola 27g. Keeping

the sugars for the Twix candy bar at 27g. and the Sunny D drink at 21g., the manufacturers of those products aimed their commercials at adults and teenagers rather than at children. The candy commercial did not meet USDA/FDA sugars standards. The beverage message, while it complied with the federal exercise suggestion for a healthful lifestyle, showing children playing baseball, did not adhere to the government's sugars criterion.

- Did advertisers refrain from placing food and beverages in editorial and entertainment content?

— Food, soda, and cereal commercials in the Hispanic market clearly did not appear in the editorial and entertainment areas, but when firms advertised future programs, one found it difficult to distinguish the program from the advertiser or product promoted.

- Did companies reduce the use of third-party licensed characters in their advertising?

— The writer saw no third-party characters, such as those that Disney uses.

- Did advertisers follow a guideline review process that allows a consumer to initiate action concerning advertising that is “unfair” or “misleading,” when commercials blurred their message with editorial content?

— CARU has expanded its advisory board to process complaints and has initiated, as well, an online complaint site. It also has started to review ads before stations show the on television, in order better to monitor them. This investigator is aware of the CBBBs' policies, guidelines that the council encourages advertisers to follow. The principles are similar to those of CARU.

- Did advertisers limit products shown in interactive games to those that are healthful dietary choices or incorporate healthful lifestyle messages into the game, therefore

addressing the use of commercial messages in online interactive games, sometimes referred to as advergaming?

— The question is not applicable to Hispanics, because they have fewer television sets and computers per household than do other groups.

Sampling

The dearth of cereal, candy, and soda advertisers in the Hispanic market made it easy for one to draw the conclusion that advertisers were keeping their CARU pledge not to advertise on Spanish-language television to children under age 12. There were 122 ads in November 2007 and 140 in January 2008. Of the companies that pledged, only two, advertising three products between them, met the government's 2005 dietary standards: General Mills with Cheerios and Multigrain Cheerios and Kellogg with Special K. The cereals ads aired in January 2008.

The makers of Cherrios, MultiGrain Cherrios, and Special K advertised their cereals with healthful messages. The Cheerios message stated that one should begin the "cholesterol count down today by eating Cheerios for six weeks . . ." and, "It [Cherrios] is clinically proven to help reduce cholesterol," though the ad appeared only with a heart around some Cheerios. The MultiGrain Cheerios ad showed a man talking to a woman, presumably his wife, telling her how good the cereal tastes and informing her of its benefits. "You wish," he says, "I would stop talking about this box of cereal with its five grains and 100% vitamins?" The only activity occurred when the man pointed to a cereal box. The Special K messages, displaying a cupboard with dozens of Special K boxes, stated, "It's your choice, all delicious and good for you," and "Lose up to six pounds in

two weeks.” There were no cultural nuances in the commercials, except that the Multigrain Cheerios ad was set in the kitchen, the center of family life in a Hispanic home.

Table 6 demonstrates how closely the three cereals met the Dietary Guidelines for Americans, 2005, for a 2,000-Calorie Diet.

Table 6 Cereals (per selected constituent, per serving) that met the USDA/FDA Guidelines for a 2,000-calorie diet, 2005

Constituent	Multigrain Cher- rios		Regular Cher- rios		Special K	
	Am't	DV	Am't	DV	Am't	DV
Calories	110	-	100	-	120	-
Protein	2g.	-	3g.	-	7g.	3%
Sugars	6g.	-	1g.	-	4g.	-
Sodium	200mg.	8%	190mg.	8%	220mg.	9%
Total Fat	1g.	2%	2g	3%	0.5g.	1%
Cholesterol	0	0	0	0	0	0
Carbohydrates	23g.	8%	20g.	7%	22g.	7%
Dietary Fiber	3g.	10%	3g.	11%	Less than 1g.	3%
Transfats	0	0	0	-	0	-
Saturated Fat	0	0	0	0	0	0
Total Fat	1	2%	2g.	3%	0.5g.	1%

Firms that did not meet the USDA/FDA Guidelines with their advertised products, but which advertised on the three Spanish language television stations in November 2007 and January 2008, appear in Table 7 below.

Table 7 Commercials for certain products that did not meet USDA/FDA Guidelines

Company	Product	Advertisement month and year	Day that ads appeared	Number of appearances
Coca Cola	Coca Cola soda	November 2007	Saturday and Sunday (mornings)	6
PepsiCo	Sierra Mist soda	November 2007	Saturday and Sunday (mornings)	8
PepsiCo	Pepsi soda	November 2007	Saturday and Sunday (mornings)	12
Mars	Twix candy bar (while it met the federal standards because the maker did not advertise to children under 12, youngsters that age watched television at the time that the candy commercials aired)	November 2007	Saturday and Sunday (mornings)	8
Mars	Twix candy bar	January 2008	Saturday and Sunday (mornings)	6

The stations also broadcast infomercials that promoted places, such as Redwood City, California, or resorts, like Zihuatanejo, Mexico. The infomercials filled an advertising gap.

During children's programming, Saturday and Sunday 8 a.m.-11:30 a.m. and Monday through Friday 5-5:30 p.m., commercials appeared for the following businesses and/or products:

Attorneys: Robert Goldwater; Ron Deutsch

Automobile Dealers: Nissan; Hopkins Honda

Builders: Empire Flooring

Food: Special K cereal; Cheerios cereal; MultiGrain Cheerios cereal; Apple Time drink;
Ritz crackers; Juicy Juice; PepsiCola; Sierra Mist; Coca Cola; Multigrain Cherrios
cereal; Sunny D

Communications: Direct TV; AT&T

Cookware: Bosch Cookware; Olympia Cookware

Cosmetics: Herbal Essence shampoo; Cover Girl makeup; Nutrisse hair dye; Pantene
shampoo

Department Stores: Macy's

Entertainment: Disney learning games; Disneyland; Disney on Ice

Furniture Dealers: Hal Coca's Furniture

Grocery Markets: Chavez Market

Insurance: Allstate; Farmers

Magazine: *Selecciones*

Health Products: Dimetap; Pepto Bismol

Restaurants: Burger King; Chuck 'n' Cheese; Dominosres; El Pollo Loco; Pizza Hut;
Sonic

Sanitary Items: Charmin (toilet paper); Clorox (bleach); Pampers (diapers)

Toys: Cabbage Patch dolls

The stations also broadcast nine infomercials that varied from 60 to 90 minutes,
though one was only 10 minutes, for the following firms, programs, and organizations:

Alli (weight loss program, 60 minutes)

Blue Hippo (computers, 60 minutes)

Celletone (beauty cream, 90 minutes)

Fairfield Chevy (automobile dealer, 90 minutes)

Ingles Sin Barreras (learning program, 90 minutes)

Orokit (gold-finding kit, 60 minutes)

Rancho Grande (homes, 90 minutes)

Save the Children International (charitable work, 10 minutes)

Scholastic Books (school books, 60 minutes)

Señor Jesus (evangelism, 90 minutes)

Timeshares (vacation homes, 90 minutes)

During soccer games, a variety of businesses advertised their products:

Drinks and Other Food: Coors Light, Budweiser, and Corona beers; Sprite, Sierra Mist,
and Coca-Cola soft drinks; Trident chewing gum

Automobile Manufacturers and Automobile Models: Jeep; Dodge; Chrysler; Tercel;
Sunnyvale Toyota; Honda Civic

Home Improvement Products: Lowe's; Home Depot

Athletic Equipment and Gyms: Addias and Converse athletic shoes; Bowflex Gym

Communications and Communication Products: Verizon Wireless; Motorola; T-Mobile

Health Products: Tylenol Cold medicine; Lactaid

Appliances: Famsa Appliances

Restaurants: Subway

Office Supplies and Equipment: Office Depot

Credit Services: Consolidated Credit

Entertainment: Cinepolis; HBO; Hipodrome de Las Ameritas; AMAC Theaters

Travel: Southwest Airlines

Banks: Bancomer

Miscellaneous: Bimbo

In addition, firms advertised many Latin videos, such as Daniel Traviosa, Don Rickett, and Arais. Some commercials, such as those for Ronnie Deutsch and Robert Goldwater, both attorneys, and Olympia Cookware and Bowflex gym, the stations showed as many as four times during an hour or one every 15 minutes.

Children ages 11-12, as well as teenagers, were likely to watch “PepsiMusica,” a program similar to “MTV,” sponsored by PepsiCo. “PepsiMusica” consists of music videos accompanied by commercials for products, such as Sierra Mist. Broadcasting this kind of commercial is contrary to PepsiCo’s promise not to promote sugary drinks to children ages 6-12. The soda contains 28g. of sugar instead of the 12g. recommended per 100 calories for an 8-oz. can. The beverage has no fat or protein. During 2007, however, the USDA/FDA guidelines changed to allow 12g. of sugar per 200-calorie serving.

If one believes that the company crossed the message guidelines when it advertised to children age 13, PepsiCo with Sierra Mist and Pepsi commercials on “PepsiMusica” during November 2007 broke the pledge not to advertise to children ages 6-12. Considering another ad, one may conclude that PepsiCo advertised, indeed, to those age 12, when it used a soccer ball in a Pepsi commercial. The commercial showed the ball rolling down the crookedest street in San Francisco while flashing on the screen the slogans, “Pepsi is the best” and “Mas Feliz,” the latter meaning drinking the beverage makes one most happy. The Sierra Mist message was, “Drink Sierra Mist for a refreshing time.” None of the ads contained a healthful message.

Though the Coca-Cola Company committed to the CARU guidelines, the firm did not meet USDA/FDA standards, when it advertised on soccer programs and the music offering “Des Central” in November 2007. Yet, the firm’s message was, “Coca-Cola is the best” or “Coca-Cola es mejor.”

One advertiser that never pledged to accept the original CARU guidelines was Sunny D. With the slogan, “Todo buena cada dia” (“It’s good every day”), the drink manufacturer appealed to teenagers in November 2007 with an ad that highlighted teenagers playing volleyball. During January 2008, the company sought the attention of children ages 8-10 with an ad that showed children in one age group playing softball, one of whom was at bat. While the scene encouraged activity, saying, “Drink Sunny D to be strong and play right,” the product did not meet USDA/FDA guidelines for a healthful drink. Yet, the beverage firm aired the commercial regularly, eight times every Saturday and Sunday, intending to demonstrate that one follows a healthful way of life, if he drinks the product. Table 8 below demonstrates how closely four beverage companies complied with USDA/FDA 2005 guidelines in 2007-2008.

Table 8 Six example beverages and the amount of certain components found in each 8-oz. serving in 2007/2008 compared to USDA/FDA Guidelines for Americans in year 2005

Product, company	Calories			Sugars in grams			Sodium in milli- grams			Total fat in grams			Protein in grams			Carbohydrates in grams		
	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines = 2,400mg.	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines = 65g.	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of us da standards for DV	Amount in each serving
Pepsi; Pep- siCo.	-	-	100	16	12	28		1%	20	-	-	0	50	-	0	300	9%	28
Coca Cola; Coca Cola Co.	-	-	100	16	-	27		1%	35	-	0	0	50	0	0	300	9%	27
Sunny D; Sunny D Beverage Co.	-	-	90	16	-	21		7%	170	-	-	-	50	0	0	300	8%	23

(Table 8 continued on next page)

(Table 8, continued)

Product, company				Calories				Sugars in grams				Sodium in milli- grams				Total fat in grams				Protein in grams				Carbohydrates in grams			
Sierra Mist; PepsiCo 7Up; Cad- bury Schweppes American Beverages Mountain Dew; Pep- siCo	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving	USDA guidelines	Percentage of USDA standards for DV	Amount in each serving
	-	-	100	16	-	26	-	1%	25	-	0	0	50	-	0	300	9%	26	-	-	0	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110
	-	-	100	16	-	25	-	1%	25	-	-	-	50	-	-	300	9%	26	-	-	-	300	10%	31	-	-	110

Another product that advertised regularly in November 2007 and January 2008, to capture the teenage and adult Hispanic market, was Twix candy bar, made by Masterfood, a division of Mars, Inc. Mars pledged to follow CARU guidelines, abided by them, employed authority figures, and simulated parents to promote the sweet, when it advertised to teenagers and adults, though, of course, the firm showed its commercials at the time that children under 12 viewed television. In addition, the candy maker did not display children in its commercials. Table 9 below compares the constituents found in a Twix candy bar to USDA acceptable levels for those components.

Table 9 Constituents found in a Twix candy bar compared to USDA/FDA Guidelines

Constituent	Amount in a Twix bar	Percent of USDA/FDA DV guidelines in a Twix bar	USDA/FDA DV guidelines
Calories	280	-	-
Fat calories	130	-	-
Total fat	14g.	22%	Less than 65g. for adults; for ages 4-18, 25g. to 35g.
Saturated fat	11g	55%	Less than 20g.
Transfat	0	-	Less than 5g.
Cholesterol	5mg.	2%	-
Sodium	115mg.	5%	Less than 2,400mg.
Total carbohydrates.	37g.	12%	300g.
Fiber	1g.	4%	14g. based upon 11.5g. of fiber per 1,000 calories
Sugars	27g.	-	16g.
Protein	3g.	-	50g.

Cultural Nuances

The writer noted a number of Hispanic cultural nuances in the advertising. One commercial, appearing on Univision, demonstrated two nuances. One showed teenagers in a car laughing and having fun, until they spot a policeman at a stop sign. Upon seeing the officer, they ceased laughing and showed respect for authority, a nuance of Hispanic culture purposely placed in the Twix ad. Although observers have concluded that family is the center of life in a Hispanic home, none of the commercials, except one for Multi-Grain Cherrios, depicted a family situation. The second observable cultural nuance was a woman, presumably a mother checking out of a market. She sees the two-part Twix as a watermelon cut in half. Comparing the Twix bar to the watermelon, she declares in Spanish, “Es refresca” – “It is refreshing,” associating the candy with the melon. Apparently, the company has aimed the candy bar at the teenage and adult Hispanic market, or the firm only wanted to encourage older people to be customers. The manufacturer, Mars, did follow the CARU guidelines for teenagers and adults. The company, thus, took its place alongside Hershey and Cadbury, firms that fulfilled their promise not to aim their commercials at children under age 12.

Another nuance found in commercials aimed at Hispanics calls attention to products that often show blond females, when most Hispanics are usually brunettes. In addition, many of the hosts of music shows like “PepsiMusica” and “Des Central,” featured blond women hosts who appeared to be of Hispanic descent.

Only Three Cereals Aired

Spanish language television stations adhered to the following schedule during which they broadcast commercials:

8-11:30 a.m.: cartoons alternated with infomercials

10 a.m.-1:30 p.m. and 3-5 p.m.: soccer

5-5:30 p.m.: general programming, such as news

The morning broadcasts also frequently included commercials for Pizza Hut, Time Shares, Sonic, and Pampers, to name a few firms. In January 2008, from 5-5:30 p.m., Kellogg (for Special K) and General Mills (for MultiGrain and regular Cheerios) advertised. All messages met USDA/FDA standards. The stations broadcast, as pointed out previously, 140 commercials in January 2008. Table 10 below provides data concerning 71 of those messages.

Table 10 Some commercials shown on Hispanic television during January 2008

Product/service	Advertiser	No. of appearances
Attorney	Robert Goldwater	16
Automobiles	Mazda	3
Automobiles	Jeep	3
Automobiles	Chevrolet	5
Beauty products	Pantene	2
Children's entertainment	Chuck 'n' Cheese	3
Communications	T-Mobile	3
Communications	Verizon Wireless	5
Computers	Blue Hippo	10
Credit company	Consolidated Credit	5
Housing	Time Shares	12
Medication	Tylenol	2
Restaurants	Pizza Hut	2

Concerning cereal advertisements for three products –Special K, Cheerios, and Multigrain Cheerios– ads for them appeared only three times each, in January in the 5-5:30 p.m. time slot, composing only about 1% of the total messages aired. Although

children do eat Cheerios, General Mills does not market the product generally as a children's cereal with cartoon characters or prizes in the box.

Inter-reliability Coding

Both the researcher and the inter-reliability coder found Special K, Cheerios, and Multigrain Cheerios to be the only cereals that cereal makers broadcast on Hispanic television. They concurred, as well, that infomercials filled advertising gaps. After reviewing the Coca-Cola, Twix, Sunny D, Pepsi, and Sierra Mist ads, the coders agreed upon what the messages wished to convey 80% of the time. The inter-reliability coder and the writer differed about the meaning of the Cheerios commercial, the former believing that General Mills was asking the consumer to take a six-week challenge to reduce cholesterol, while the latter felt that the firm wanted people to believe that Cheerios was beneficial for the heart. The observers also disagreed that the Kellogg's Special K ad promised the consumer that one would lose six pounds in two weeks after eating the product.

CHAPTER V

Conclusions

With nine million children overweight, Congress asked the 50 top food advertisers to submit their advertising budgets by or in December 2006. Ten corporations, or 15%, responded immediately. Those firms, which one will find listed below, comprised two-thirds of all food advertisers:

Cadbury Schweppes, USA	Campbell Soup
Coca-Cola	General Mills
Hershey	Kellogg
Kraft Foods	McDonald's
PepsiCo	Unilever

What prompted Congress' request was the childhood obesity rate for children ages 6-18. The number of pounds that children were overweight, studies revealed was between 10 and 40. Health officials, physicians, and Congress theorized that there was a link to children's television advertising and obesity, or being overweight (Braswell, 2006b; Dietz, 1983b; Lobstein & Jackson-Leach, 2007b). Twenty-two percent of Mexican-American children ages 6-11 are overweight as are 23% for ages 12-19 (United States Department of Health & Human Services, 2002).

Instead of submitting their budgets, the firms responded by creating and releasing CARU guidelines. The CARU initiative vowed that its participants would direct at least half their advertising at promoting more healthful dietary choices (that is, good nutrition), or to healthful lifestyles to children under age 12. The CBBBs observed that more than 50% of the advertisers said that they would take the pledge, a number that might increase

over time (Council of Better Business Bureaus, 2007b). McDonald's finally declared that it would advertise only its Apple Dippers, which, the company said, met the 2005 USDA/FDA daily value guidelines for Americans. General Mills and Kellogg stated that by the end of 2008, they would not advertise to children under 12 (General Mills Media Center, 2007; Martin, 2007b).

The present study confined itself to cereals, candy, and sodas. Hershey and Cadbury Schweppes USA did not advertise their candy. General Mills did not advertise to children exclusively; the corporation aimed its three commercials at adults, although it is possible that children, especially in a Hispanic family, well could ask for the firm's Cheerios and Multigrain Cheerios, because the concern markets Cheerios as finger food, an eating habit that the both product boxes promote. The writer did not see children in Cheerios ads: the only healthful message that the box delivered was that the product was "heart smart." Three television ads, though, claimed that a person could lose up to six pounds in two weeks by eating Cherrios. The Multigrain Cheerios ad also met the USDA/FDA standard for advertising a healthful diet. The healthful message in the Multigrain ad was, "Eat right in the morning." Kellogg's Special K also measured up to USDA/FDA standards.

On one hand, while the Sunny D Company did not take the pledge, the Mars firm did pledge to adhere to the 2005 USDA/FDA guidelines and kept its promise not to aim its commercials for sugar-laden products to children under 12, though it still promoted them teenagers and adults. On the other hand, the companies also placed misleading health messages in their ads. A Sunny D commercial declared, "Drink Sunny D and be

strong,” while the Mars firm advertised the Twix candy bar as “refreshing and good for you.”

Limitations of the Study

There are limitations to the present study. One is that it examines primarily Hispanics, although the researcher briefly mentions other groups. Another is that it confines itself to cereals, candy, and soda, though other foods, like pizza, chips, and hamburgers, may harm children, if eaten in excess. The investigation did not code those foods.

The writer hopes that the present project contributes to the literature on obesity by making easily available a useful bibliography that demonstrates how Hispanic health, obesity, and advertising are related. The literature demonstrates that advertisers, by following CARU guidelines, could promote healthful lifestyles to children. Using its advisory board, CARU may pre-screen advertising in order to protect children from messages that lack healthful content. Kellogg, feeling threatened by a potential lawsuit, has stated that it will cease to advertise products that do not meet federal standards that disallow servings that contain trans fats and those with more than 200 calories, 2g. of saturated fat, 230 mg. of sodium, and 12g. of sugars. Kellogg also decided not to use licensed characters in association with sugary food. That Kellogg will cease advertising its cereals to children or will phase out certain foods, unless the products meet the government’s standards, is a particular triumph. Kellogg also will no longer advertise cereals that have third-party characters, like Shrek, unless they meet the USDA/FDA standards (Martin, 2007b). Last November, McDonald’s and General Mills pledged to direct to children half their advertising messages that promote healthful and active lifestyles. General Mills kept its pledge.

The healthful food and advertising situation in the Hispanic market is complex. It will take more than eliminating advertising sugary foods to solve such a multi-faceted problem, a difficulty that involves Hispanic traditions that keep Hispanic children so overweight or obese that they fall victim to the Latino tendency to fall victim to Type 2 Diabetes.

Hispanic Market Projections

The Hispanic market is poised to number 102.6 million people by July 2050, that is, 24% of the United States population (National Academy of Science, 2001; United States Bureau of the Census, 2005). Sixty-three percent of the present nine and a half million Hispanic families, which include more than 5,985,000 children, are under age 18.

The application of federal standards that define desirable weight dictates that today over nine million American children older than six are overweight or obese. The figure jumped from 5% in 1983 (Dietz, 1983b) to 29% in 2000 (United States Health & Human Services, 2002b). In 2004, more than 35% of the nation's children were overweight or obese (Lobstein & Jackson-Leach, 2007b). Because Washington projects that Hispanics will be the largest minority in the nation in 2050, this population segment's health is important to the entire country. Because the cost of pediatric obesity hospital stays have escalated from \$43 million to \$127 million per year, advertisers, for that reason alone, should gear their commercials to the facts, such as those that the present study has assembled. One cannot emphasize more how important it is that food manufacturers ought to promote a healthful lifestyle and encourage healthful dietary choices in their commercials. The American Academy of Pediatrics concurred with a Kaiser study, released in 2007, that children see more than 30,000 ads per year, half of them for cereals

that are high in sugar and half for high-density snacks, which are high in calories and low in nutrition.

The United States Department of Health & Human Services has noted that a 2002 national health and nutrition examination found that African-Americans and Mexican-Americans ages 12-19 were more likely to be overweight at 21% and 23%, respectively, than non-Hispanic White adolescents who were at 14% (NHANES, 2002). The study revealed that concerning children ages 6-11, 22% of Mexican-American children were overweight compared to 20% of the African-American and 14% of the non-Hispanic White. Thirty-one percent of Chinese-American children ages 6-11 were overweight (Chen & Kennedy, 2005). Thirty-nine percent of American-Indians were also at risk for obesity or being overweight. Scientists have defined being at risk for being overweight as having a BMI-for-age between the 85th and 95th percentile for fatness (United States Department of Health & Human Services, 2002).

Inactivity Blamed on Television Watching

NHANE concluded that only 20% of 4,063 Mexican-American children participated in vigorous activity once or twice a week. Overall, 26% of United States children viewed four or more hours of television each day, and 67% watched at least two hours of television daily. Children who watched four or more hours per day had a greater body mass index than those who watched less than two.

Three Conceptual Theories

Three main conceptual theories are associated with how increased television watching affects obesity and Type 2 Diabetes, a condition and a disease for which Hispanics have a genetic link. The first theory is that television viewing displaces physical

exercise while it increases food consumption, therefore reducing energy expenditures.

Both the second and the last conceptual theories concern the influence of television upon one's dietary choices. The second takes up the idea that when both younger and older children see food on television, they will pester their parents for it (Byrd-Bredbenner & Grasso, 2000; United States Department of Health & Human Services, 2002). The third conceptual theory is that advertising influences dietary and other food choices, a situation that may contribute to energy imbalance and weight gain, as evidenced by a Kaiser Family Foundation 2004 study.

Poverty Rate a Problem

A final problem for Hispanics is that 21.9% are living at the poverty level. Because this population segment lives in poor neighborhoods and must travel by bus or taxi to a grocery store, where the proprietor does not usually have on hand fresh fruits and vegetables, mothers choose food that will last, some of which is high in calories (and less expensive), such as prepared foods. The food industry also does little to educate minorities about many companies' unhealthful marketing efforts, a situation that often causes a person to suffer poor health (Lee, 2006).

Some Advertisers Have Met Their Pledges

Hershey and Cadbury Schweppes kept their promises not to advertise to children under age 12. Although the researcher did not code Kraft, the firm is teaming up with Nickelodeon to offer a frozen vegetable line. Such actions are evidence of a trend characterized by advertising that highlights healthful food choices, a program that resulted from the issue of the CARU guidelines. The results show there are fewer advertisers on Spanish-language television than on mainstream television. One noted, however, that

several public service announcements or paid programming appeared. Telefutura's paid programming included infomercials, such as an invitation to visit a Mexican resort and another to buy an attractive home in a desirable location. The public service announcements were "Save the Children," for example, and one from the Ad Council that encouraged youngsters to exercise by playing hopscotch. There were many Pepsi commercials on Galavision, especially during "PepsiMusica," from 11-11:30 a.m. In one Pepsi ad, the word "mas" or "more" flashed on the screen, meaning a person should drink more Pepsi. Other findings include those derived from the program "Des Central," a half hour that is clearly for teenagers, which the stations aired during the 11-11:30 a.m. slot. The program showed women in bathing suits competing in a dance contest.

Other Findings

Other findings, which include data from numerous commercials, pertain to many products other than cereals, soda, or candy. Some ads, 262 of them, included spots for Scholastic Books, Jeep, Chrysler, Corona beer, Verizon, Pantene, Home Depot, USE (United States English), English without Barriers (Ingles sin Barrears), and Sears, Roebuck.

Other advertisements, for Tercel, AMAC, and Coors, were only three of more than 20 advertisements shown during soccer, alone. As for Mars' Twix, all stations showed many commercials for the product during November 2007 and January 2008. Mars honored its pledge with Twix, but only in reference to teenagers and adults. It was the ad for Twix, which contains 280 calories per serving, which showed three blond teenagers stopped apparently for speeding. The teenager driving stopped immediately when she saw the policeman with a "Policia" cap. Respect for authority is a Hispanic nuance

cited in this study. Because the present investigation concerns children 6-12, one should note that Mars with Twix pursues, instead, the teenage and adult market. In another ad, a shopper cuts a watermelon in half at the supermarket while a housewife exclaims, "It's so refreshing."

The USDA and FDA have not investigated advertising in the Hispanic market specifically and, therefore, have not issued a report. Congress, however, set up a committee in 2006 to monitor advertising in that market, but results are not yet available. Without the desired report, the health, census, and business literature concerning cereal, soda, and candy, which the writer reviewed in this thesis, reveals realities about the Hispanic diet and the Latino way of living in the United States. Perhaps those writings may substitute, at least in part, for the expected summary until the government publishes the document.

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APPENDICES

APPENDIX A

MyPyramid Foods Standards

Definitions

MyPyramid, part of USDA Guidelines, is a personal eating plan that defines for people what are smart food choices, identifies the amount of food people should eat, and encourages finding a balance between food and physical activity. The plan also recommends that individuals exercise 30 minutes each day. The government has designed the guide for individuals age 2 and over (USDA, 2005).

USDA/FDA guidelines emphasize the consumption of fruits, vegetables, whole grains, and milk products, including lean meats, poultry, fish, beans, eggs, and nuts, all foods that are low in saturated fats, trans fats, cholesterol, sodium, and added sugar.

Key Recommendations

- Consume two cups of fruits and 2 ½ cups of vegetables per day for a 2,000-calorie diet. A higher or lower calorie diet will require one to adjust the consumption amount.
- Choose a variety of fruits and vegetables each week from five vegetable subgroups (those that are dark green, i.e. spinach); orange (i.e. carrots); starchy vegetables (i.e. potatoes), and legumes (i.e. dry beans).
- Consume 3 or more ounces of whole-grain products per day and 3 cups per day of fat-free or low-fat milk or equivalent milk products.

Some FDA and USDA Definitions for Healthy Foods

- “Free” – a product can only contain “physiologically inconsequential” amounts of fat,

saturated fat, cholesterol, sodium, sugar, and calories. “Calorie-free” means 5 calories per serving.

- “Low” foods are foods that can be eaten without exceeding per serving dietary guidelines for fat, saturated fat, cholesterol, sodium, and calories:

Low fat: 3g. or less

Low calorie: 40 calories or less

Low saturated fat: 2g. or less Low cholesterol: 20mg. or less

Low sodium: 140mg. or less

For transfat, the system recommends 0.5g. Transfat is made when manufacturers add hydrogen to vegetable oil – a process called hydrogenation. Hydrogenation increases the shelf life and flavor stability of foods containing objectionable fats. One finds such fats in vegetable shortenings, some margarines, crackers, cookies, and snack foods. In major food sources for adults (average daily transfat intake should be 5.8g. or 2.6% of calories), 40% of undesirable fats, for example, is found in cookies, cakes, crackers, pies, and bread, 17% in margarine, and 5% in potato chips (USDA/FDA, 2005).

- “Reduced” calories means that a food manufacturer has altered the amount of a nutrient or the number of calories in a regular product by reducing the constituent at least 25%. The claim cannot be made if the food already meets the requirement for “low” (USDA, 2005).

APPENDIX B

Children's Advertising Review Unit (CARU) Guidelines

- Devote at least half of television, radio, print, and Internet advertising that is directed to children under age 12 to promoting healthier dietary choices and/or give messages that encourages good nutrition or healthful lifestyles.
- Promote “healthy dietary choices” and “lifestyles,” which include exercising. Pledges to promote health must coincide with established scientific and/or government standards, including the USDA/FDA guidelines.
- Products must meet FDA/USDA and MyPyramid criteria to be “free,” “low,” or have acceptable amounts of calories, total fat, saturated fat, sodium, and sugar.
- Refrain from food and beverage product placement in editorial and entertainment content.
- Reduce the use of third party licensed characters in advertising, an advertising device that does not meet the federal guidelines.
- Promote a guideline review process that encourages a consumer to take the initiative to prevent “unfair” and/or “misleading” advertising and to prevent an advertiser from blurring editorial content with his products.
- Limit products shown in interactive games to healthful dietary choices or incorporate healthful lifestyle messages into the game. Address the use of employing commercial messages in online interactive games, sometimes referred to as advergaming. The practice is not applicable, because Hispanics only watch 51/2 hours of television weekly.