



Fool Me Twice

With tactics perfected by the tobacco industry over the last 50 years, multinational food, beverage and alcohol companies are working to deter, delay and derail policies that save millions of lives.

LET'S NOT BE FOOLED AGAIN.

Multinational food, soda and alcohol giants are employing the same tactics that made tobacco a pariah in the global public health conversation nearly two decades ago.

Corporate food, soda and alcohol giants, whose products undermine health and wellbeing, shouldn't be given the chance to derail or impede progress on fighting noncommunicable diseases (NCDs).

This report offers evidence that the same unacceptable practices used by the tobacco industry are being employed by the food and alcohol mega-industries and argues that governments should consider policies to curtail such influence on public health policy. Decades of tobacco control show the alternative is millions of preventable deaths.



**“Fool me once,
shame on you.
Fool me twice,
shame on me.”**

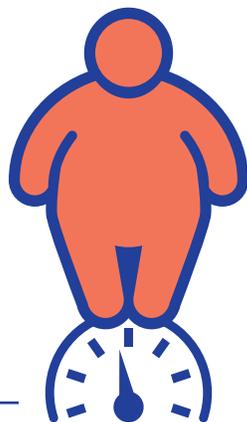
**Just like the tobacco industry,
the food, soda and alcohol
industries are driving the 21st
century's deadly NCD pandemic.**

	Tobacco Use	Unhealthy Diet	Alcohol
Heart Disease and Stroke			
Cancer			
Diabetes			
Chronic Lung Disease			
Annual Deaths (latest reported)	7m^[1]	3.4m^[2]	3.3m^[3]

Increased consumption of processed foods and drinks – those containing high levels of added sugars, salt and fats – tracks closely with rising levels of obesity, diabetes and cardiovascular diseases across the world.^[4]

82%

of premature NCDs, such as diabetes, occur in low- and middle-income countries.^[5]



2.1 billion

people are obese or overweight.^[6]

42 million

children under age 5 are obese or overweight.^[5] **3/4** of these children live in developing countries.^[6]

The largest food, beverage and alcohol companies are using the tobacco industry's deadly strategies to block progress on health interventions at each step in the policy process:



Just under a dozen giant, powerful multinational companies have the clout to block effective policies that reduce consumption of unhealthy products.

3

ADOPTION

Proposed policies are taken up by governments through the political process.

Undercutting Health Legislation

Coca-Cola waged a coordinated campaign to oppose or undermine legislation on soda taxes in 14 countries.^[11]

4

IMPLEMENTATION

Lives are saved when effective policies are put into practice and enforced.

Challenging Existing Legislation

The food industry used intellectual property and trade arguments to lobby against legislation passed in Chile that required simple food labels alerting consumers to high levels of fat, sugar and salt.^[12]

Pressuring Low and Middle Income Countries

When Barbados passed a tax on sugary drinks, a United States delegation led by a former U.S. governor, flew to Barbados to try to convince the Prime Minister and Ministry of Health to reverse the tax, offering help in “other ways” with NCDs.^[13]

With their political and economic might, the soda industry has stopped or stalled soda tax efforts in Russia, Germany, Israel and New Zealand.^[14]

The challenge of the 21st century is upon us – a challenge that cuts to the core of public health, as well as social and economic progress.^[1]

Today, nearly three out of four deaths worldwide are attributed to NCDs (chronic diseases that include cancer, diabetes, heart disease and chronic lung disease) which already kill 39.5 million people a year.^[6]

Among the indisputable causes of this pandemic are multinational food, beverage and alcohol companies, who systematically undermine healthy diets by encouraging over-consumption of highly processed, unhealthy food and sugary drinks for profit.^[15, 16] In the past year, academics, health advocates and the World Health Organization (WHO) have begun to refer to the challenge these industries present as “commercial determinants of health.”

As with tobacco, patterns of marketing unhealthy products were developed in high-income countries and later deployed to low- and middle-income nations.^[16] It is here that the biggest burden of NCDs exists – in countries whose health systems are the least likely to be able to cope with the growing NCD burden or to have regulations in place to protect consumers.^[17]

These industry giants use strategies that include flooding the markets of Mexico and South Africa with soda, concentrating advertising for unhealthy foods around schools in the Philippines and marketing beer to young women in Taiwan.^[18, 20] They also work to block WHO policy guidelines that protect children.^[19-21]

Just as tobacco companies market their products to young people and entice them to smoke with sophisticated advertising, soda and alcohol marketing locks in “loyal” customers from a young age, putting the next generation at ever greater risk for obesity, alcohol dependence and preventable deadly diseases.^[16, 22-25]



Alcohol in fruity flavors and cartoons are likely to attract young women in Taiwan.

Obesity is considered one of the most serious public health problems of this century.^[24] Two billion people are overweight or obese today, including 42 million children under the age of five.^[16, 27, 28] If nothing is done, this number is expected to balloon to 70 million overweight young children by 2025.^[26] Soda – which is high in calories and without nutritional value – is cited as the largest contributor to added sugar in the American diet.^[29] It is a leading driver of obesity, diabetes and heart disease in both adults and children.^[16]

Alcohol consumption is also associated with NCDs including cardiovascular diseases, some cancers, diabetes and liver disease, and is implicated in car crashes, suicides, homicides, domestic violence and mental and behavioral disorders.^[32] The younger individuals are when they start drinking, the greater the likelihood that they will suffer from alcohol dependence.^[30, 31]

The largest food, beverage and alcohol industries push voluntary guidelines as a strategy to avoid effective government regulation such as taxes, labeling and marketing restrictions – all WHO “Best Buys.” Industry tactics include aggressive lobbying, undermining independent science, litigation and employing front groups to fight their battles.^[15] In addition, industry-promoted voluntary guidelines, codes of conduct and partnerships with governments and civil society are often used to avoid or delay legal regulation.^[23] There is scant evidence that self-regulatory approaches are effective.^[15]

The strongest players are a small number of multinational companies with the resources, influence and reach to delay health policy progress on national and international levels. These companies control much of the world’s food and beverage supply:

- Fewer than a dozen enormous companies control almost every large food and beverage brand in the world.^[32]
- PepsiCo, Nestlé, McDonald’s and eight other global giants have combined revenue of US \$397 billion.^[33]
- A third of global beer sales are controlled by Anheuser-Busch InBev SA/NV, an amount that is expected to reach \$55 billion in annual sales this year.^[34]

- Carbonated soft drinks are a \$350-billion-a-year market.^[6]
- Nestlé is among the top three packaged food companies in Brazil, India, Russia, South Africa, Mexico and the United States.^[15]

With massive budgets at their disposal, food, beverage and alcohol industries are able to co-opt, manipulate and block government action, using their clout to deter the very policies designed to limit consumption of their products.

Often, these industries rely on the same strategic playbook that was perfected by the tobacco industry. But while a non-engagement policy forbids the tobacco industry a role within WHO, multinational alcohol and unhealthy food and beverage industries have continued to consult with WHO on international policy, especially when it comes to NCDs. Alcohol and food and beverage industry trade groups and lobbyists attended the most recent WHO Global Conference on NCDs in Montevideo, Uruguay during the fall of 2017.

Countries including India have taken the position that the same restrictions that keep tobacco from a role in the creation of health policy should be extended to big food, beverage and alcohol industries. These countries cite a conflict of interest between the industry's need to maximize profits and WHO's mandate to advance public health.^[35]

It's time for global health advocates to accept that, like tobacco; food, soda and alcohol giants' interest in growing their bottom lines often impedes public health priorities.^[36]

Allowing industry to delay or defer progress on the NCD epidemic will result in millions more premature and preventable deaths and disabling diseases.

CALL TO ACTION

Drawing on the hard-learned lessons of tobacco control, let's commit now to curbing the influence of multinational food, soda and alcohol on health policy.

RECOMMENDATIONS

- Reversing the NCD pandemic will require strong regulation: Countries must be able to develop and implement sound regulatory policies, as outlined by WHO, to protect their citizens – without risk of interference from commercial interests.
- WHO, the UN system and member states should not allow multinational food, beverage and alcohol companies to engage in NCD policy development or formulation. Nor should they accept money from these sectors.
- Transparent and robust conflict-of-interest policy at the international and national level is needed when it comes to food, beverage and alcohol industry giants.
- NCD prevention and policy must be driven by uncompromised, independent research and evidence.

Partnerships, Self-Regulation and Reformulation

There are times when it is appropriate and important to work in tandem with food and beverage industries. For instance, once government regulations are enacted, the implementation of warning labels on packaging requires industry cooperation. However, research shows that letting industry drive policy solutions usually leads to ineffective or weakened policy, at best.^[38]

These mega-industries remain adept at shifting the conversation away from WHO-endorsed, effective, evidence-based policies that protect public health. This, despite the knowledge that, as seen in Chile for instance, measures such as clear food labels, not only encourage healthier choices by consumers, but pressure industry to create healthier products.^[39]

In the United Kingdom, voluntary initiatives to reduce salt intake in order to combat hypertension through product reformulation have contributed to reducing overall levels of salt consumption.^[38] But researchers in both the U.S. and the UK share concerns about voluntary systems as a solution. They cite the disproportionate level of power that voluntary guidelines cede to industry and highlight the need for time-bound commitments, as well as monitoring and enforcement.^[40] In other countries, including Canada and Argentina, voluntary approaches to salt reduction have been considered a failure.^[41]

In addition, while reformulation might be a worthwhile strategy in high-income countries, saturated with unhealthy products, it is not wise in low-income countries, where local diets are traditionally healthier than those western diets dependent on heavily processed food.

“Despite common reliance on industry self-regulation [and public-private partnerships], there is no evidence of their effectiveness or safety.”

– The NCD Action Group of *The Lancet*^[42]

As the tobacco industry has shown, having multinational food, soda and alcohol companies at the table will increase their profits – not improve global health.

“Efforts to prevent non-communicable diseases go against the business interests of powerful economic operators. In my view this is one of the biggest challenges facing health promotion...it is not just Big Tobacco anymore. Public health must also contend with Big Food, Big Soda and Big Alcohol. All of these industries fear regulation, and protect themselves by using the same tactics.”

– Dr. Margaret Chan
Former Director General, WHO
2006 – 2017 ^[37]

“When the history of the world’s attempt to address obesity is written, the greatest failure may be collaboration with, and appeasement of, the food industry”

– Kelly Brownell,
Dean, Stanford School of Public Policy, Duke University ^[43]

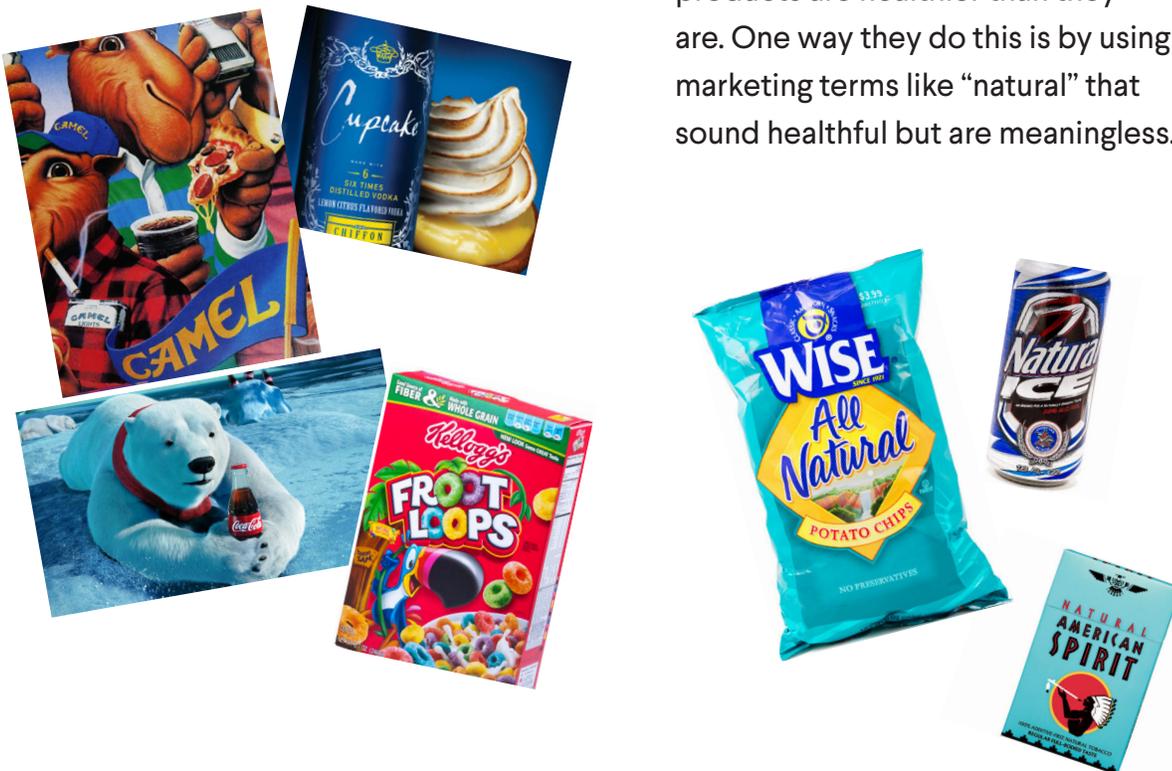
At the very best, working with mega food, beverage and alcohol industries is likely to lead to ineffective or compromised policies.^[44]

TACTIC:
TARGETING CHILDREN, DECEIVING CONSUMERS

Like tobacco, giant food, soda and alcohol companies oppose regulations by adopting self-enforced voluntary guidelines. Each industry promises not to target children, yet they commonly pursue products, marketing channels and messages that appeal to youth.

The global beverage industry spends billions on advertising to entice young consumers but blames individuals that use their products for not practicing self-control or making healthy decisions.

Multinational food and beverage companies are adept at deceiving consumers into believing their products are healthier than they are. One way they do this is by using marketing terms like “natural” that sound healthful but are meaningless.



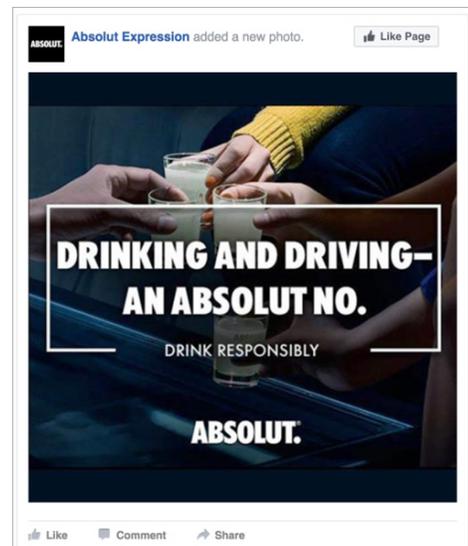
TACTIC:
COMBATting POLICIES THAT EFFECTIVELY REDUCE NCDS

In Mexico the beverage industry filed legal proceedings to block taxes on unhealthy products, claiming the policy was unconstitutional.^[45-47]



TACTIC:
OFFERING QUESTIONABLE ASSISTANCE TO GOVERNMENTS

Governments often partner with the alcohol industry on road safety efforts and industry-branded school-based programs with little or no evidence that these partnerships are effective in reducing the harmful use of alcohol.^[48, 49] Such programs provide the false appearance that governments are adequately addressing the issue.



Effective for reducing alcohol harms or a branding strategy?

Multinational beverage, food and alcohol industries use many of the same tactics that got the tobacco industry banned from WHO's policy discussions.

TOBACCO: BANNED FROM GLOBAL POLICY MAKING

More than 50 years ago, the U.S. Surgeon General's Report on Smoking and Health recognized that tobacco was, much like a mosquito, a vector of an emerging health epidemic. Since then, curbing tobacco use to improve health has become a role for governments worldwide.^[50]

Early “partnerships” between governments and the tobacco industry undermined public health goals and delayed effective regulations.

The end of any relationship between the tobacco industry and WHO came in 1999, when a review of tobacco company documents pointed to a systematic global effort by the tobacco industry to “neutralize” the WHO and national governments.^[51] A WHO-appointed committee found that the tobacco industry regarded WHO as “one of their leading enemies, and that the industry had a plan to ‘contain’ and ‘reorient’ WHO’s tobacco control initiatives” by:^[52]

- Attempting to reduce WHO budgets for their scientific and policy activities ^[52]
- Pitting other UN agencies against WHO ^[52]
- Distorting the results of critical scientific studies on tobacco, including a multi-million-dollar campaign to undermine an epidemiological study on the link between secondhand smoke and lung cancer ^[52]
- Paying “independent” academic institutions, consultants and journalists to undermine WHO’s credibility and question its “mission and mandate”^[52]

Recognizing the inherent conflict of interest in the mission of the tobacco industry and the aims of public health, along with the evidence of tobacco industry interference, WHO created a policy on non-engagement with the tobacco industry. Also, in 2003, the World Health Assembly adopted article 5.3 of the WHO Framework Convention on Tobacco Control (FCTC) to quarantine the tobacco industry from health policy development. The treaty wisely excludes the tobacco industry from any involvement in public health policy decisions with this phrase:

“The tobacco industry should not be a partner in any initiative linked to setting or implementing public health policies, given that its interests are in direct conflict with the goals of public health.”^[51, 53]

Today, the sugary beverage industry uses these same tactics to subvert WHO and deter policy progress. Earlier this year, BevSA, South Africa’s beverage industry association, misled the media about WHO’s position on soda taxes.^[54] BevSA falsely told the media that WHO did not support a proposed soda tax, before WHO officials were able to present expert testimony at a public hearing on the tax.^[54]

Effective policies for NCD Control

PRICING POLICIES	
Tobacco	Tobacco taxes
Alcohol	Alcohol taxes
Diet	Taxes on foods high in sugar, fat, salt and calories

Credits: HealthBridge, World Health Organization

**MARKETING
RESTRICTIONS**

ACCESS

Ban point of sale
advertising and other
advertising, promotion
& sponsorship

Make work places
smoke free

Ban point of sale
advertising and other
advertising, promotion,
& sponsorship

Reduce the number of
outlets and hours that
alcohol can be sold

Ban unhealthy food
ads on children's TV
programming; consider
other advertising

Ban sales of soft drinks &
fast food at schools and
health centers

Comparing Tactics

Tobacco, food, soda and alcohol use the same tactics to delay effective health policy.

COMPANY TACTICS

SIMILIARITIES BETWEEN INDUSTRIES

Obscure and deflect

Diverting attention from evidence-based solutions by using scare tactics and tangential issues in order to evade regulation

Undercut the science

Using large research budgets to undermine and create doubt around credible science that links their products to poor health

Undermine the World Health Organization

Attacking WHO's credibility – the very reason that the tobacco industry was removed from policy discussion at WHO

Push voluntary guidelines

Pushing for ineffective voluntary guidelines in the face of statutory regulations. Voluntary codes have “very little evidence of effect” and are considered by “a clear failure” by some researchers.^{[63] [64]}

Use “personal/parental responsibility” arguments

Pushing the responsibility for unhealthy habits onto consumers allows these industries to argue against regulations.

TOBACCO INDUSTRY TACTICS

Highlights illegal distribution and cross-border smuggling to deter policies on raising taxes and other effective regulations.

Publicly attacked a 1981 landmark study that showed Japanese women whose husbands smoked had much higher death rates from lung cancer.^[56] Meanwhile, internal tobacco industry memos acknowledged the study was done by “a good scientist...and his publication was correct.”^[57]

A 2000 investigation requested by the General Director of WHO, showed that the tobacco industry attempted to reduce WHO budgets for scientific and policy activities. It also found that the industry pitted UN agencies against WHO and waged a multi-million-dollar campaign to undermine an epidemiological study on secondhand smoke.^[52]

While the tobacco industry denies that it targets youth, after R.J. Reynolds launched cartoon “Joe Camel” as the face of the Camel brand of cigarettes in 1987, demand grew from less than 1% to 32.8% of underage purchasers in four years.^[65]

At the 1996 shareholders meeting of cigarette and food manufacturer RJR Nabisco, Chairman Charles Harper responded to a question about secondhand smoke’s impact on children by saying, “If the children don’t like to be in a smoky room...they’ll leave.” When a woman responded, “An infant cannot leave,” Mr. Harper responded, “At some point they can learn to crawl, okay?”^[67]

MULTINATIONAL FOOD, SODA AND ALCOHOL TACTICS

Coca-Cola provided funds to the Global Energy Balance Network, which publicly supported science claiming obesity is determined more by a lack of exercise than by diet.^[55]

The Sugar Association spent \$655,000 on 17 studies designed “to maintain research as a main prop of the industry’s defense.” Each proposal was vetted by a panel of industry-friendly scientists and a committee staffed by representatives from the sugar and international food industries.^[58 - 61]

WHO estimates have placed alcohol’s role in the global burden of disease on par with tobacco. But an alcohol-industry-funded organization published its own report that focused on the limitations of the study, falsely claiming that the estimates had failed to consider different drinking patterns.^[62]

Studies across 19 countries from Australia to Ghana show the alcohol industry does not follow its own voluntary codes and guidelines for marketing and advertising.^[66]

“If all consumers exercised, did what they had to do, the problem of obesity wouldn’t exist.” —Indra Nooyi, CEO of PepsiCo.^[6]

Comparing Tactics

COMPANY TACTICS

SIMILIARITIES BETWEEN INDUSTRIES

Bring lawsuits to deter and intimidate

Waging costly legal battles against much needed regulation that protect children

Deploy front groups

Several industries use farmers as political props, even though the benefits of farming a cash crop such as sugar or tobacco are offset by food insecurity, sustained debt, indentured work, environmental damage and poverty.

Target children

These industries, while saying they don't, often target children with their marketing.

TOBACCO INDUSTRY TACTICS

In Uruguay, Philip Morris International sued the government for \$25 million for a practical and effective public health intervention to discourage pregnant women and others from smoking: printing large pictorial warnings on cigarette packs. Philip Morris' budget dwarfs Uruguay's gross domestic product.^[68]

Tobacco growers from Malawi and other African countries were brought in by the tobacco industry to protest when tobacco control policy was being discussed at international WHO meetings.^[69]

Marlboro links smoking with being adventurous, taking risks and trying new things, with their global "Don't be a maybe" campaign.

MULTINATIONAL FOOD, SODA AND ALCOHOL TACTICS

In Mexico, the beverage industry filed legal proceedings to block taxes on unhealthy products.^[45-47]

In 2015, when negotiating US-Mexico sugar trade, sugar industry lobbyists on both sides of the border evoked sugar farmers as vulnerable subjects in order to avoid trade restrictions.^[70]

Alcohol advertisements are found online, on Snapchat, Youtube, Facebook and Instagram – where children and young people spend much of their time.^[71]



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Vital Strategies is a global health organization that believes every person should be protected by a strong public health system. Our team combines evidence-based strategies with innovation to help develop and implement sound public health policies, manage programs efficiently, strengthen data systems, conduct research, and design strategic communication campaigns for policy and behavior change.



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