

# **Food, health and company behaviour: is CSR an adequate policy response?**

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# This presentation

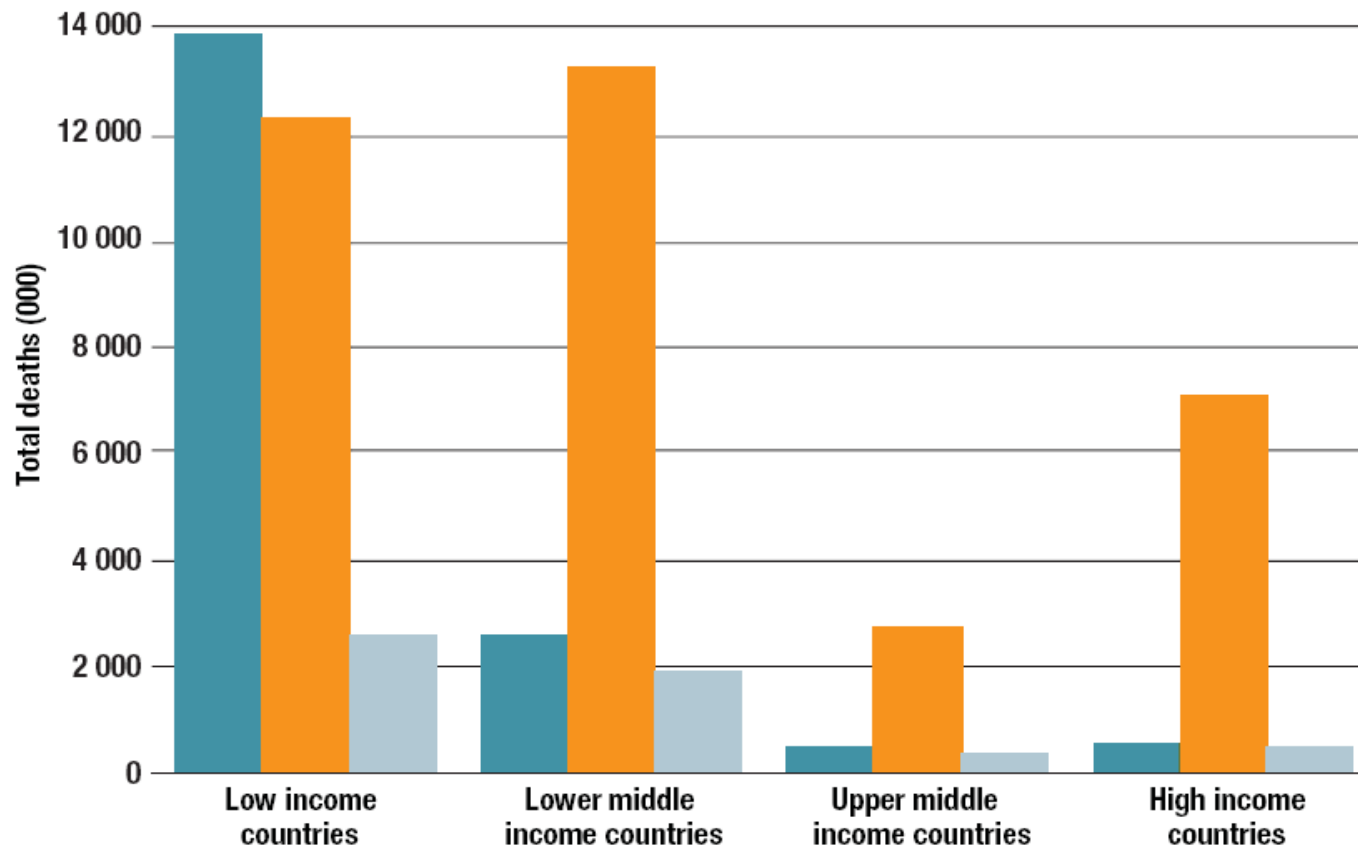
1. **Background:** NCDs & costs
2. **Drivers:** diet + lifestyle?
3. **Policy response:** WHO DPAS + state policies
4. **The City University study:** findings
5. **Developments:** emerging issues

# 1. Background

# What's the problem?

- **Rising *toll of NCDs* – including most visibly obesity and diabetes**
- **Growing *economic burden*: healthcare**
- **Creation of *health inequalities***
- **The *spread of 'Western' diets* and companies to the developing world**

## Projected deaths by major cause and World Bank income group, all ages, 2005



■ Communicable diseases, maternal and perinatal conditions, and nutritional deficiencies  
■ Chronic diseases\*  
■ Injuries

\* Chronic diseases include cardiovascular diseases, cancers, chronic respiratory disorders, diabetes, neuropsychiatric and sense organ disorders, musculoskeletal and oral disorders, digestive diseases, genito-urinary diseases, congenital abnormalities and skin diseases.

WHO (2005)  
Preventing Chronic  
Diseases: a vital  
investment.

Overview. Geneva:

# Yearly deaths due to risk factors associated with tobacco, diet and physical inactivity

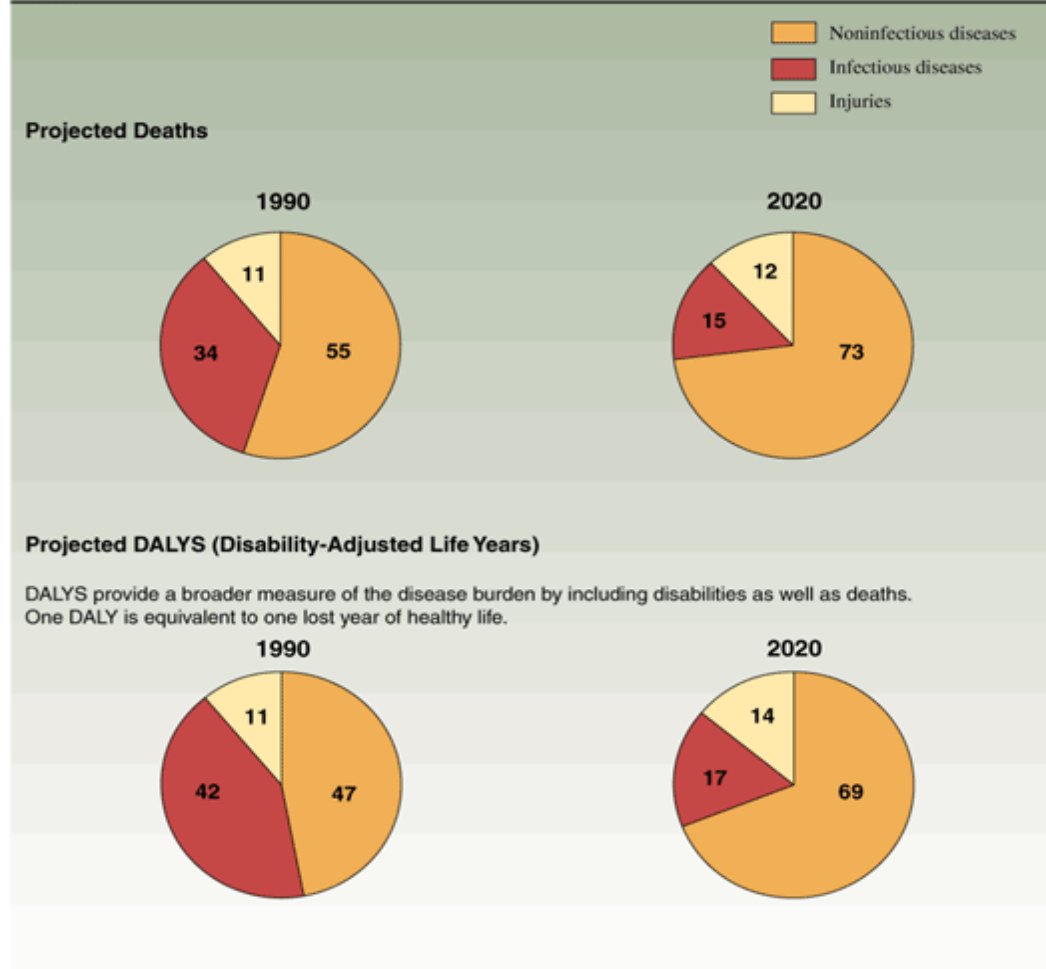
- 4.9 m people die as a result of tobacco use
- 2.6 m people die as a result of being overweight or obese
- 4.4 m people die as a result of raised total cholesterol levels
- 7.1 m people die as a result of raised blood pressure.

WHO (2005) Preventing Chronic Diseases: a vital investment. Overview. Geneva: WHO p.6

# The projected rising toll of NCDs

Figure 13  
Projected Changes in the Global Distribution of Deaths and DALYS by Causes According to the Optimistic Scenario, 1990-2020

Percent

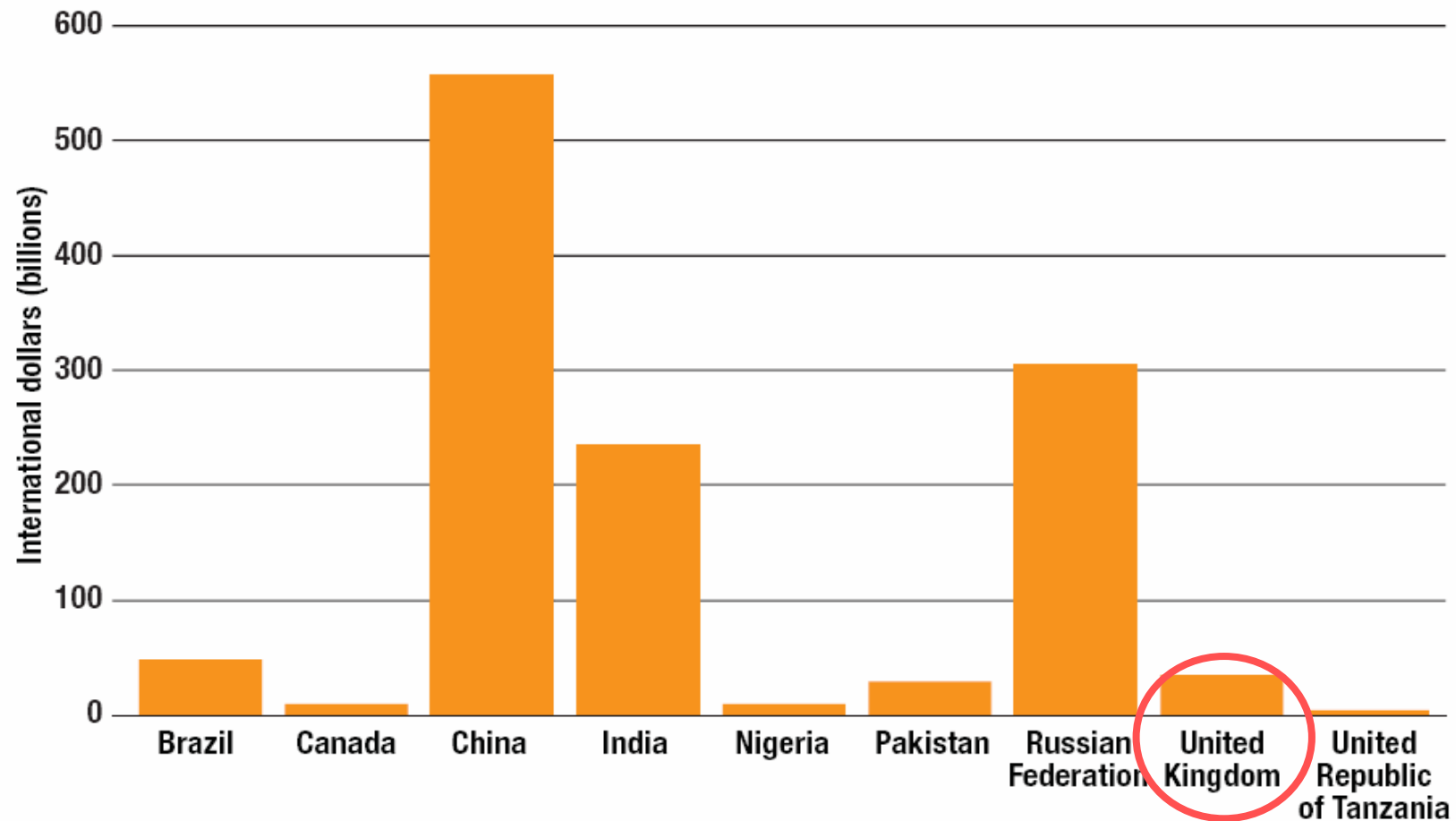


Sources: Adapted from World Bank; WHO; *The Global Burden of Disease*, edited by Christopher J. L. Murray and Alan D. Lopez, 1996.

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## Projected foregone national income

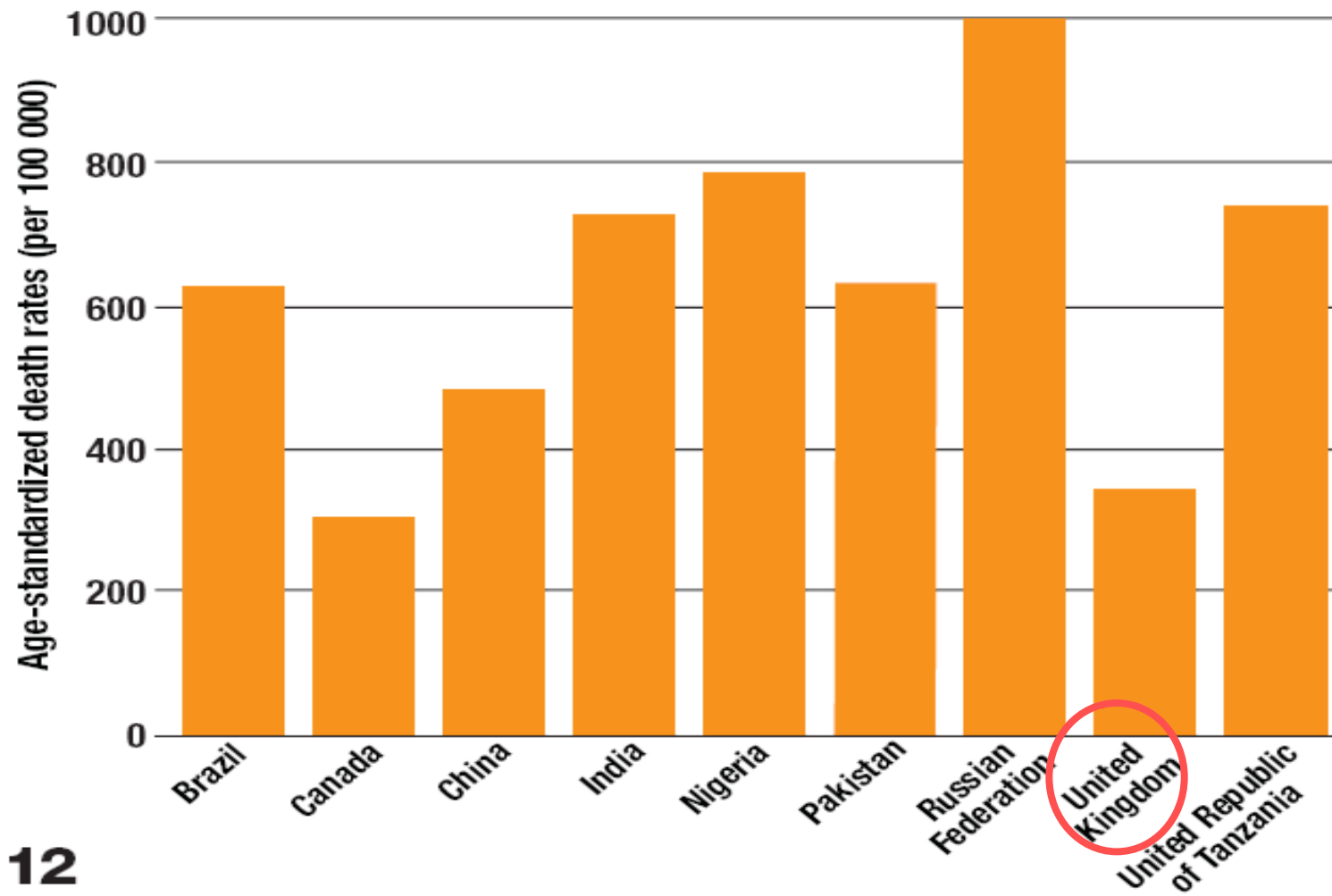
due to heart disease, stroke and diabetes  
in selected countries, 2005–2015



WHO (2005) Preventing Chronic Diseases: a  
vital investment. Overview. Geneva: WHO p.5



## Projected chronic disease death rates for selected countries, aged 30–69 years, 2005



12

WHO (2005) Preventing Chronic Diseases: a vital investment.  
Overview. Geneva: WHO p.12

## 2. Drivers

# What is driving this situation?

- **DIET:**
  - *Shift from simple to processed foods*
  - *Rise of fat production and consumption*
  - *Rise of soft drinks*
- **PHYSICAL INACTIVITY:**
  - *Rise of cars*
  - *Rise of obesity (alongside underweight)*
- **CULTURAL CHANGE:**
  - *Supermarketisation*
  - *Lifestyle*
  - *Advertising*

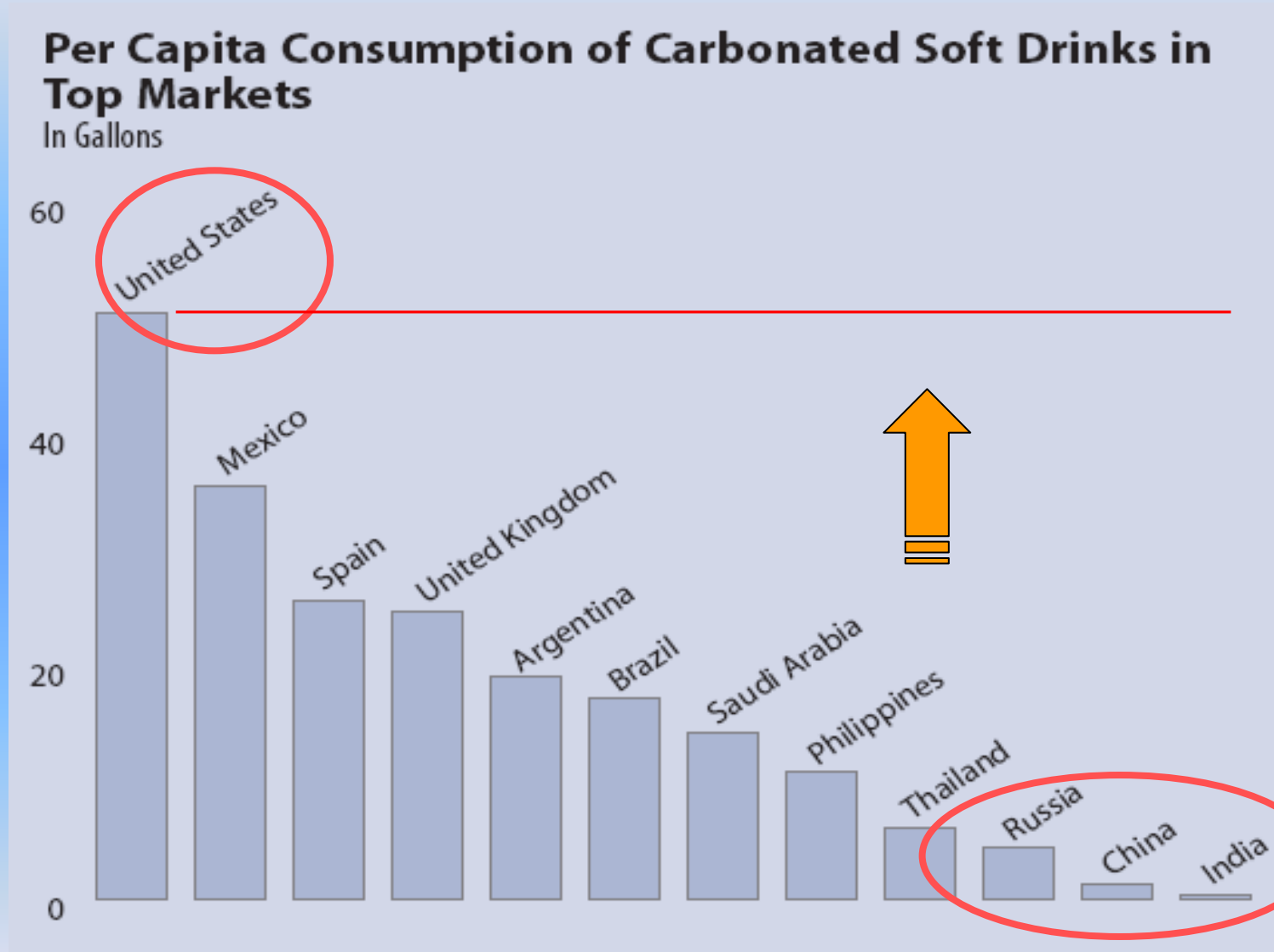
# Example of dietary drivers 1: fat

## Trends in the dietary supply of fat

Region	Supply of fat (g per capita per day)				
	1967-1969	1977-1979	1987-1989	1997-1999	Change between 1967-1969 and 1997-1999
World	53	57	67	73	20
North Africa	44	58	65	64	20
Sub-Saharan Africa <sup>a</sup>	41	43	41	45	4
North America	117	125	138	143	26
Latin America and the Caribbean	54	65	73	79	25
China	24	27	48	79	55
East and South-East Asia	28	32	44	52	24
South Asia	29	32	39	45	16
European Community	117	128	143	148	31
Eastern Europe	90	111	116	104	14
Near East	51	62	73	70	19
Oceania	102	102	113	113	11

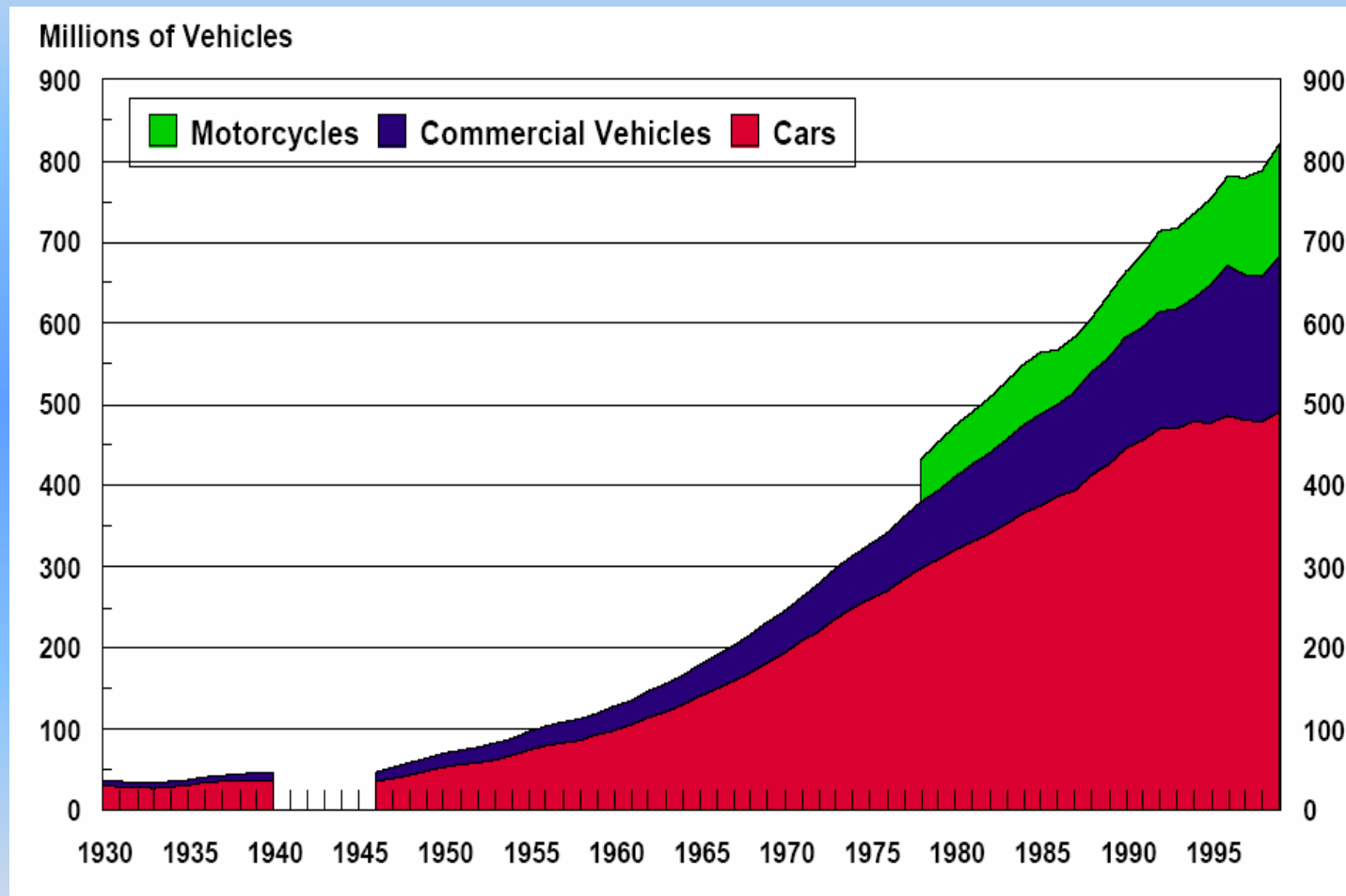
<sup>a</sup> Excludes South Africa

# Example of dietary drivers 2: soft drinks



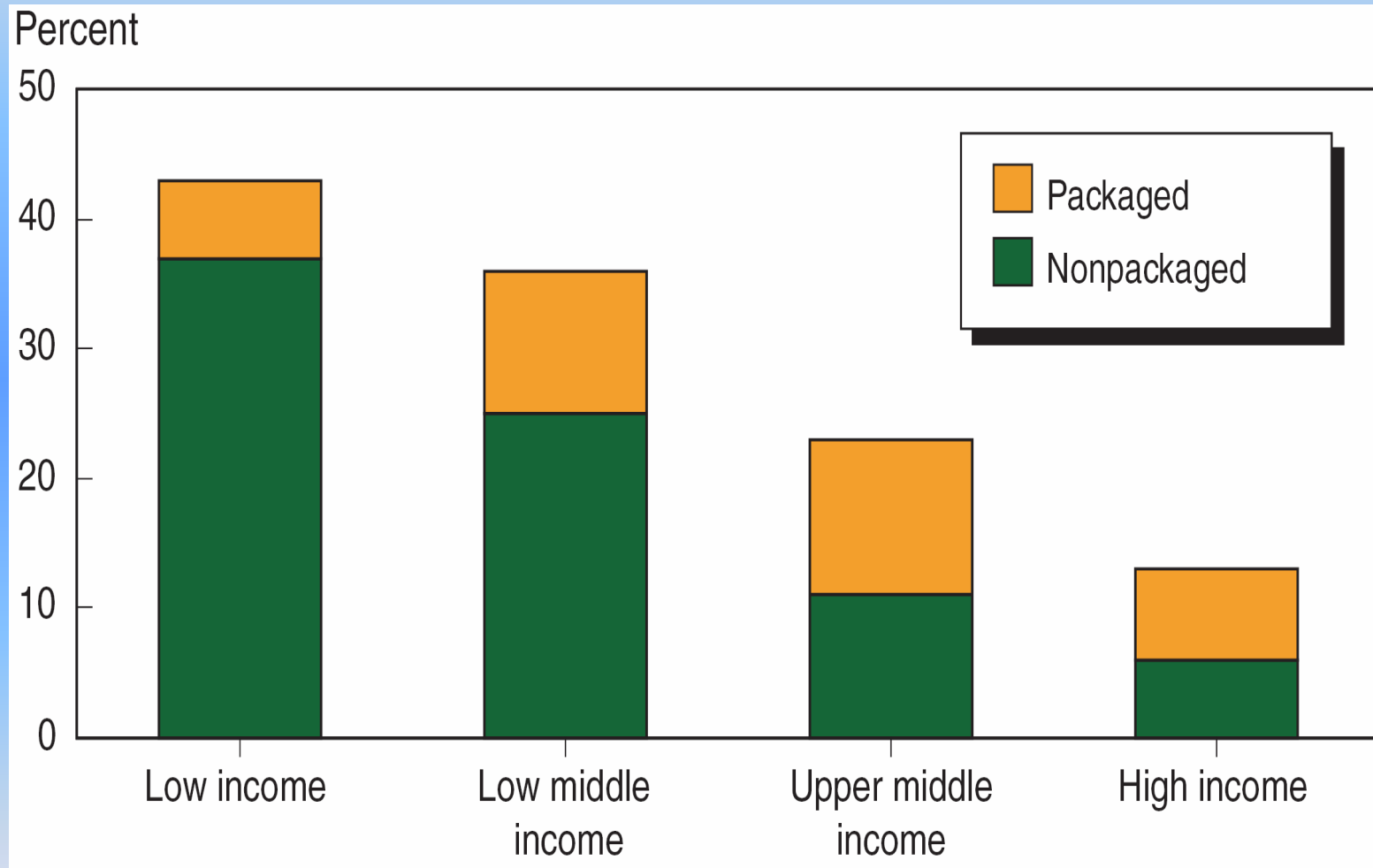
Source: Pepsico

# Example of physical inactivity drivers: motorised transport 1930-2000



Michael P Walsh, Motor Vehicle Pollution Control, Paper to China Fuel Economy Workshop, Hong Kong, December 13, 2004,  
<http://www.walshcarlines.com/china/Applying%20The%20Lessons%20To%20China%20-%20MOVE%20.pdf>

# As economies develop, consumer expenditure shifts from non-packaged food to packaged food



Source: Euromonitor, 2003  
<http://www.euromonitor.com>

15

# As ‘globalisation’ increases, ‘supermarketisation’ increases

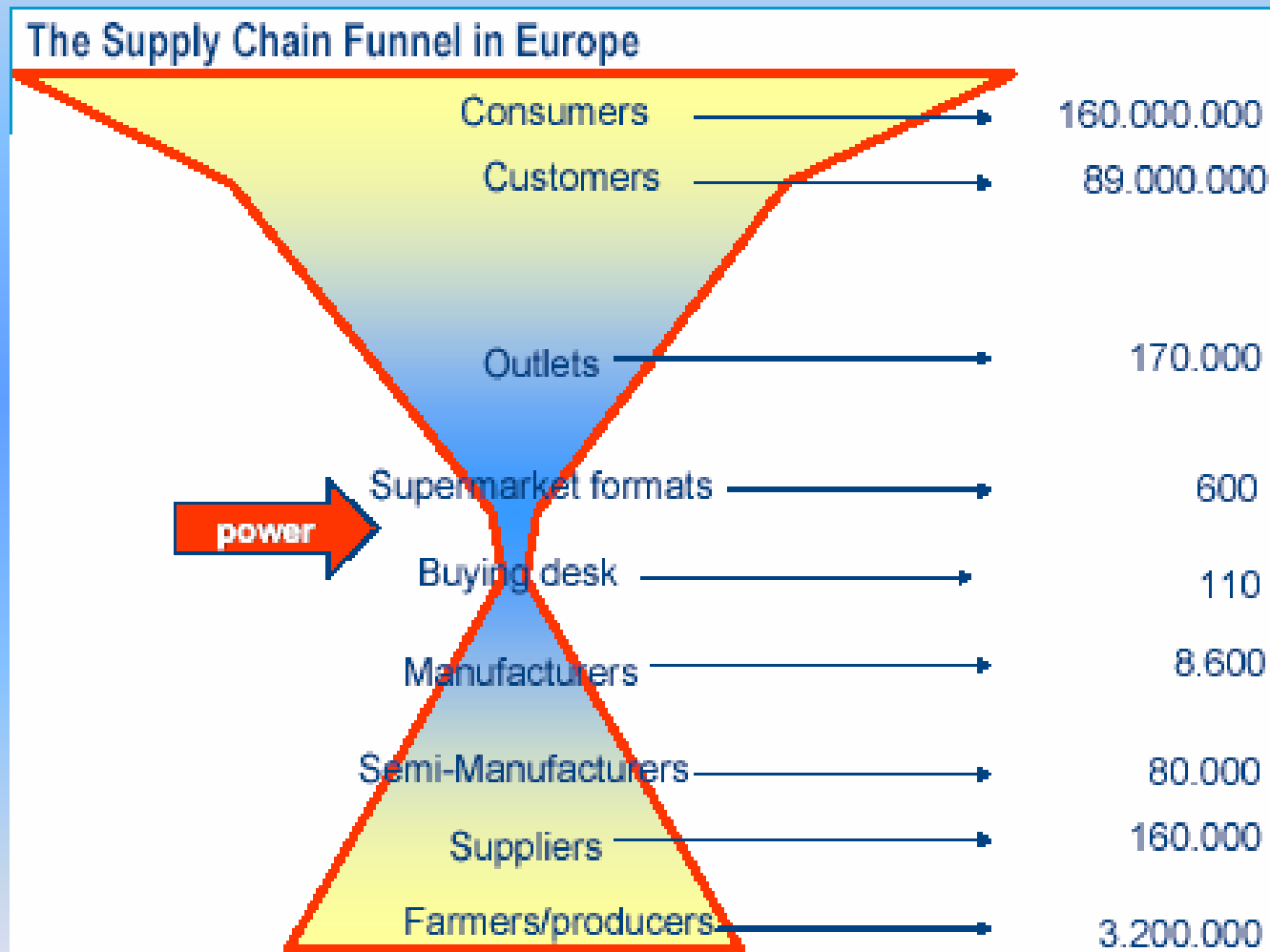
Table 1—Share of food sales for retailers in selected international markets, 2002

Retail outlets	United States	Western Europe	Latin America	Japan	Indonesia	Africa and Middle East	World
	<i>Percent sales</i>						
Supermarkets/hypermarkets	62.1	55.9	47.7	58.0	29.2	36.5	52.4
Independent food stores	10.0	10.0	33.0	11.3	51.1	27.1	17.8
Convenience stores	7.5	3.8	3.1	18.3	4.8	10.0	7.5
Standard convenience stores	5.7	2.5	1.8	18.2	4.8	9.5	6.4
Petrol/gas/service stations	1.8	1.2	1.3	0.1	0.0	0.5	1.1
Confectionery specialists	0.5	2.0	1.7	0.3	0.1	1.3	1.2
Internet sales	0.2	0.1	0.1	0.4	0.0	0.0	0.2
Chemists/drugstores	0.2	0.3	0.2	0.4	0.2	0.3	0.3
Home delivery	0.4	0.2	0.0	0.0	0.0	0.0	0.1
Discounters	7.4	10.3	0.2	2.2	2.7	6.2	5.7
Other	12.0	17.5	14.0	9.0	11.9	18.6	14.9
Total	100	100	100	100	100	100	100

Source: Euromonitor, 2004.



# Power shift in the supply chain: Retailers, not farmers, dominate supply



Source: J-PGrievink, Cap Gemini, OECD 2003

# Far-away Tesco - in Thailand



picture: Geof Rayner 2005

18

# 3. Current policy responses

# Emerging global policy

- **Evidence gathering on NCDs, obesity from 1960s: e.g. Ancel Keys (1970)**
- **WHO report TRS 797 (1990)**
- **WHO/FAO TRS 916 (2003): reaffirms evidence + Nutrition Transition**
- **→ WHA DPAS 2004 Resolution 57.17**
  - *Requests governments to take action*
  - *Requests Companies to act*

# National responses: state

- **Countries vary in responses**
- **Most stress**
  - *‘The informed consumer in marketplace’*
  - *National cultural traditions (e.g. Mediterranean diet)*
- **Reliance on ‘Soft’ responses**
  - *health education*
  - *labelling, information*
- **Public health = healthcare but**
  - *this costs!*
  - *It is not a good model for developing countries*
- **Obesity crisis is showing this mix is NOT WORKING**
  - *New willingness to think more radically*

# 4. City University study

# City University study

- **Available on website:**

<http://www.city.ac.uk/press/The%20Food%20Industry%20Diet%20Physical%20Activity%20and%20Health.pdf#search=%22City%20University%20Big%20Food%20Companies%20report%22>

- **Follow up with joint work with International Business Leaders Forum and HBOS Insight Investment**

# Motives and methodology



# Our motives for the study

- **We wanted to help the WHO**
- **Follow up to request in DPAS 2004**
- **Are big companies responding to DPAS?**
- **How do companies address health?**
- **Our aim: ‘hold up a mirror’ to companies**
  - *how does the sector see itself through its self reporting?*

# Specific context: companies & WHO

- **Beginning of finance houses' interest: J P Morgan reports (2003 & 2006)**
  - *show the impact of obesity consciousness on food manufacturing*
  - *Show potential impact of investors in influencing company behaviour.*
- **WHO DPAS at the WHA 2004 asked big food companies to change their products and their marketing**

# Methodology (1)

- **The team was: City University, Insight Investment and Horizons FS**
- **We chose global top companies from 3 dominant sectors (by turnover):**
  - *Manufacturing (top 10)*
  - *Retail (top 10)*
  - *Foodservice (top 5 = 2 contract & 3 quickservice)*
- **We produced profiles of companies of what companies report they do**

# Methodology (2)

- **We developed a public health template based on DPAS with 14 issues in 36 sub-headings**
- **The research was done on a ‘systematised’ basis**
- **We were very generous in recording company action**
- **We looked at financial year 2004-05**

# Methodology (3)

- **We created company profiles**
- **These used the companies' own reports, websites, etc**
- **No other direct contact with companies**
- **No use of external reports or other sources**
- **Used headquarters only – not subsidiaries**
- **Some companies were in 200+ countries!**

# Quick summary

# Summary of City Study findings

- **Overall, the big food companies appear to be making a limited response to DPAS**
- **Sectors vary (retail is the weakest):**
  - *Some are not engaged*
  - *Some partially engaged*
  - *No-one is fully engaged*
- **Our recommendations**
  - *company reporting has got to improve*
  - *Company products have to change, too*

# Findings in more detail



# R&D and Mergers & Acquisitions

- **Most companies provided little information on the amount of investment made in R&D**
- **Only 6 of 25 provide any figures on R&D spending: Cadbury Schweppes, Danone, Kraft, Nestlé, Unilever and Yum!**
- **5 of those 6 co.s are in food manufacturing**
- **Any M&A activity that is happening is not reported as being driven by health concerns**

# Spending on marketing, advertising and sponsorship

- **Only 12 companies provided spending figures, enabling calculation of what proportion this was in their turnover**
- **These were: Cadbury Schweppes (1.1%), Coca-Cola (10.5%), Danone (5.3%), Kraft (5.1%), PepsiCo (5.8%), Tyson (1.8%), Unilever (13.6%), Ahold (0.7%), Kroger (1%), Wal-Mart (0.4%), McDonald's (3.8%).**
- **Only 1 company - McDonald's – provided any disaggregated information in this general area.**

# **Company stance on corporate responsibility (1)**

- **23 of 25 companies had stated CR reports and /or ‘general statements of purpose and values’ related to non-financial company goals**
- **Despite this, companies as a whole did not appear to be taking health as a core consideration.....**

## CR (2)

- **11 of the 25 companies make a reference to health in these CSR / values statements:**
  - *Danone, Kraft, PepsiCo, Unilever, Ahold, Carrefour, Kroger, Tesco, Compass, McDonald's, Yum!*
- **4 manufacturers, 3 retailers, and 3 of 5 foodservice companies referred to health in their statements of purpose and values or CSRs**

# Stance on diet, nutrition and physical activity (1)

- **17 of 25 companies made a statement or statements of some kind on diet, physical activity and health: 8 manufacturers, 4 retailers, 5 foodservice (all)**
- **Only 4 companies reported KPIs: Kraft, Unilever, Tesco and Sodexo.**
- **The low number of KPIs suggests that companies are making general statements without much commitment.**

## **Stance on diet, nutrition and physical activity (2)**

- **6 of 25 companies report that they have a Board member or senior personnel responsible for health-related matters**
- **Only 1 company (Kraft) scored positively on all three issues reported here**

# **Policy commitments on physical activity, obesity, children and ‘healthy’ product ranges (1)**

- **11 of 25 companies make policy or reported commitments on physical activity.**
- **Food manufacturers are more engaged with the physical activity issues (7 of 10).**
- **11 of 25 companies had policy statements on children’s food: six manufacturers, two retailers and three foodservice.**
- **11 of 25 companies indicated a policy commitment to having a ‘healthier’ range of products.**

# **Policy commitments on PA, children, obesity & 'healthy' range (2)**

- **Only 1 retailer made a statement on physical activity**
- **Only 2 foodservice reported policy and action**
- **11 of 25 companies have policy statements on obesity (50% manufacturers 30% retailers, 60% foodservice)**



# Policies on marketing, advertising, promotion and sponsorship (1)

- **Only 4 of 25 companies had any policies on advertising, all manufacturers:**
  - *Cadbury Schweppes, Danone, Nestlé and Unilever*
- **Only 6 companies had policies specifically on children (despite ‘ready-made’ CARU guidelines)**

# **Policies on marketing, advertising, promotion and sponsorship (2)**

- Only 4 companies gave stated support to voluntary codes**
- Both retailers and foodservice score very poorly across the board on marketing and advertising and vending**

# **Position on product formulation and sizing**

- **Only 4 companies reported action on fat:  
2 manufacturers, 2 quickservice**
- **Only 2 reported action on portion size:  
Kraft and McDonald's**
- **Retailers performed particularly poorly  
but one (Ahold) was acting on 3 of the 5  
'hot' issues we looked at (besides fat /  
portion size)**

# Labelling, product information and nutrition claims (1)

- **11 of 25 companies reported positions on on-product labelling:**
  - *Cadbury Schweppes, Coca-Cola, Kraft, Nestlé, PepsiCo, Unilever, Ahold, Carrefour, Ito-Yokado, Metro and Tesco*
- **No foodservice company had on-product labelling policy**

# Labelling, product information and nutrition claims (2)

- **11 of 25 companies provided other sources of information.**
  - *5 manufacturers: Cadbury Schweppes, ConAgra, Danone, Nestlé and Unilever*
  - *3 retailers: Ahold, Ito-Yokado and Kroger*
  - *3 foodservice companies: Burger King, McDonald's and Yum!*

# Labelling, product information and nutrition claims (3)

- **Only four companies provide information about nutrition claims:**
  - *Danone, Kraft, Unilever and McDonald's*

# **Company promotion to its own staff and community on healthy lifestyles and physical activity**

- 10 out of 25 companies reported that they have staff health programmes**
- The five manufacturers were Cadbury Schweppes, Coca-Cola, ConAgra, Kraft and Nestlé**
- The two retailers were Metro and Rewe**
- The three foodservice companies were Compass and McDonald's and Sodexo**

# Overall findings



# City study Summary (1)

- **A minority of Big Food companies report they are engaging with the full (population) health agenda**
- **Of sectors, food manufacturers appear to be more fully engaged, with foodservice less so and retailers trailing far behind**
- **Listed and privately owned companies differ in their degree of openness and reporting**

## City study summary (2)

- **Most Boards of Directors do not seem to be giving health leadership**
- **Some Companies that do have Board or high level health leadership appear to be doing more than those which have none**
- **The business strategy re-think that JP Morgan detected has further to go**

# City study summary (3)

- **Overall, there is very weak reporting by companies in their annual reports and other company sources**
- **This was a baseline study**
- **The methodology is now tested but a future study requires company engagement with process**

# 5. Developments & the future

# Company reactions

- **Big discussion among companies**
- **Other companies auditing themselves using our approach**
- **Worries about being sued: obesity**
- **Shareholder audits (JP Morgan 2003/06)**
- **Will companies do more than see health as a ‘niche’?**

# Self-regulation or regulation?: A Code of Health Conduct?

- **International Business Leaders Forum + Insight Investment process**

- **2006 Draft code of conduct / Framework:**

– [http://www.insightinvestment.com/documents/responsibility/Press/framework\\_consumer\\_health\\_and\\_obesity.asp](http://www.insightinvestment.com/documents/responsibility/Press/framework_consumer_health_and_obesity.asp)

# Movement at state level

- **Obesity driving willingness to think more radically**
- **WHO Europe Ministerial Istanbul November 2006**
- **EU still preferring voluntary tri-partite approach: Round table on Diet & Physical Activity**
- **UK considering ban on advertising: too late?**

# Taking this issue to society

- **International interest: media coverage**
- **NGOs need to do health audits: NCC lead**
  - *UK National Consumer Council health audits of top 10 retailers 2004, 2005*
- **Parents the key drivers?: child health?**
- **Public health research:**
  - *studies needed at national and regional level*
  - *Develop the methodology*



**The issue will not go away!**

**Thank you!**