

Public-Private Partnerships in Chronic Disease Prevention Part 7

[Announcer] This podcast is presented by the Centers for Disease Control and Prevention. CDC – safer, healthier people.

[Elizabeth Majestic] Dr. Eriksen, what lessons can the public health community learn from the tobacco control experience that might be relevant for the obesity epidemic?

[Michael Eriksen] The first thing I would say is that we had it easy with tobacco. In many, many ways the tobacco industry was clear they didn't deserve to be partnered with. They forfeited the right for collaboration. That the product they sold had no intrinsic value to it. One out of two lifetime users would die. With food and beverages, it's much more complex. It's much more difficult. People have to eat. They can decide or not whether to exercise. And in my studying this issue and preparing the report for the Institute of Medicine that came out in the *Health in the Balance* document, it's clear that you need to have an ecologic approach. You need to look at not only the individual but the forces that act upon the individual - the family, the schools, the community, the media, and the commercial enterprises that prepare the products that are then sold. And I do think fruitful collaborations can occur, in fact, must occur, for us to make progress around obesity prevention where the public health community can work with the food and beverage industry but it needs to be done in a manner where there's a shared vision, common goals, and transparency. Our goal is not to help them sell bad products. Our collective goal should be to reduce the burden that we're seeing from childhood obesity.

[Elizabeth Majestic] And do you have some specific ideas toward that end?

[Michael Eriksen] I do. I'm not sure how well shared they are by others but it's clear that marketing plays an important role in behavior. Whether it's automobiles or toothpaste or cigarettes or food, the behavior of the food industry in marketing highly sugared foods to kids I think is close to reprehensible. The high-fat of foods, the convenience foods that are marketed to children, something needs to be done about. From tobacco, we learned that there's certainly a lot of promise with price manipulations. In other words, taxing unhealthy products and perhaps subsidizing healthy products. Whether that's with a tax or simply making them more available and more accessible would be a strategy that would certainly help. The third area, the one I'm most excited about and that I've had some discussions with CDC about was, many of the things we've talked about are tactics as opposed to a strategy. And the strategy is that I think we just need to reorient the social norms as they relate to food and physical activity. When I lived in Europe for two years, I joked that there was no such thing as Styrofoam. That if you wanted to eat, you had to sit down and eat. If you wanted a cup of coffee you had to sit down and drink it out of china. There was no food to go. The helping serving sizes were much more modest. At first I was surprised by it but after living there for two years we welcomed it. And they have a whole different orientation towards food. Not one of quantity but one of quality. And the same with physical activity. I think that we could launch a long-term strategy that involved media, advocacy, all the things that we know about how to change norms, to begin to reorient the

American public towards a healthier lifestyle that was based upon eating for quality, eating smaller sizes, and being more physically active. It's not going to happen in a couple of months, it's not going to happen in a couple of years, but it could happen over a decade, and that's the lesson we've learned, I think, from tobacco.

[Elizabeth Majestic] Now as you know, there are several, many of the companies are actually engaging in their own campaigns to try and get people physically active. Some would say that this is more strategic and a PR move than it is an actual campaign intended to change behaviors of the public in which they're serving. How can we work with the industry to help them understand our goals, their goals, and also hold them accountable? Because many argue that in fact if they are going to promote campaigns that they should be looking at the same kinds of outcomes from those campaigns that we look at in public health.

[Michael Eriksen] Well I think it is all about outcomes. I have a colleague, Steve Sugarman at the Berkeley Law School, and his approach is what's called Performance Based Regulation. That companies are given targets that they have to meet based on *Healthy People 2020*, or something similar, where it doesn't matter how they reach it, but they have to make their contribution to achieving a public health goal. So if it's reducing childhood obesity, if it's reducing salt intake, if it's reducing smoking rates among young people, that they're given a target and they have a certain number of years to achieve it and it doesn't matter how they achieve it, but if they achieve it, they don't get penalized. If they don't achieve it they get penalized. It's kind of this cap and trade model that if they exceed their target then they could sell credits to another company that didn't do it. So it's putting the onus on the companies to be responsible for helping to solve the problem that they created. And I think that type of approach is out-of-the-box, it's innovative, and warrants some consideration. It's really a modification of the lookback provision that was contained in the 90s when there was discussions going on about federal legislation around tobacco. So I think that there needs to be accountability. And I have to say, I'm a little distressed by some of the efforts of the companies that may be seen as disingenuous. So when you have a food company or a beverage company who are selling high-fat or high-caloric soft drinks and their only campaign is about physical activity, I think it's missing the target. That they need to take responsibility for what they're contributing to the problem and come up with alternatives so it's not just no other options but a high-fat, high-sodium meal. And that they...it isn't enough for them just to say, "Eat this meal and go out and be physically active." They need to address the problem that they are contributing to, as well.

[Elizabeth Majestic] As you know, the companies are approaching state health agencies, they're approaching national nongovernmental organizations, they're approaching community-based organizations for partnership opportunities that include resources, oftentimes. Do you have any advice for public health entities that are being approached by these industries so that they can either engage with them in ways that are productive or advice about how they can...should avoid?

[Michael Eriksen] Well I think it shouldn't be about the money. It needs to be about the outcome. And that there needs to be a very thorough vetting of the proposal to see is what's being proposed going to help contribute to solving the problem. And if independent of the money, independent of the glamour of partnering with a major corporation and having their name with your logo and

the money and visibility that may come from that, there needs to be just a very objective assessment of what the proposed actions are and whether they're actually going to contribute to addressing the problem that's being... under consideration. And secondly, I think the relationship has to be very transparent, everyone has to know fully what's in it for both parties, and that people need to act in that regard. I think it's certainly possible that the private sector and the public health community can work together to achieve something that neither could achieve alone. But it needs to be outcomes based. It needs not to be adopted because of the enthusiasm associated with the partner or the money, and it needs to be transparent.

[Elizabeth Majestic] Actually, going back, can you talk a little bit about how the tobacco industry has shaped our field's viewpoint towards partnerships with the public sector and comment on how things have changed and what your advice would be in terms of taking those lessons but in moving forward...what we need to do?

[Michael Eriksen] That's an interesting, it's an interesting question because I think the level of antagonism towards the tobacco industry has opened to us to be more considerate of other types of private partnerships. It's that the tobacco industry is an outlier. It's unfortunate that we couldn't work with them and therefore let's try to work with others in a more constructive way so that we have a more balanced portfolio. I think that that's fine. That's just the reality. I think the pendulum will swing somewhere in the middle that will be based on accountability and transparency and the idea that there's going to be some synergy from the collaboration, that what's going to be achieved couldn't be achieved by either party by themselves. But I actually think that the tobacco experience has moved the public health community to be more considerate... or considering of partnerships and it's also moved the corporate community doing whatever it takes not to be vilified like the tobacco industry. So you see the food companies and the beverage companies and others kind of breaking the ice, coming forward and trying to do the right thing, even though we may not think it's enough. God forbid they're considered to be like a tobacco company because everyone knows what the ultimate result of that is. Not only litigation but vilification and the only people who buy the product are those who are addicted to it. No other company wants to be put in that posture. They want to be much more favorably viewed.

[Elizabeth Majestic] Dr. Eriksen, I want to thank you for participating in this interview today and I want to give you an opportunity to share any other thoughts about this topic that I might not have asked you.

[Michael Eriksen] Well I think the tobacco experience is a very valuable one in that a lot can be learned from it in terms of working with other private partners and that there is great possibility of moving the ball forward. I think with tobacco companies themselves it really depends upon the... kind of the rules of engagement. What are the parameters that are structuring the relationship? And my sense is that they need to be external and they need to be regulatory and they need to be very strict and rigid because the tobacco companies have proven that they can't be trusted and they really have forfeited the right for collaboration and partnership. That can change in the future, particularly around new products if, in fact, there's this common regulatory framework that guides all the actions towards the public good. That's certainly obvious and logical and whether it can be achieved or not is another issue. And I think those lessons have relevance for other types of partnerships around physical activity, diet, and even in the area of

climate change. Where I was recently at a meeting looking at the tobacco experience and what relevance it may have for changing behavior in other areas, and once again, there's a very close linkage between individual behavior, the customer, the public, and corporations. The utilities, the oil companies, many of them are getting with the program, so to speak. They're using their marketing dollars to emphasize energy efficiency, trying to become greener, and that needs to be built upon and also looked at transparently to make sure that it's just not a marketing campaign, and that it's a real sustainable change that's going to occur that's really going to contribute to the ultimate outcome, which is, you know, trying to mitigate the harm caused by climate change.

[Elizabeth Majestic] Thank you very much.

[Michael Eriksen] My pleasure. Thank you.

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