

Restaurant Children's Meals: The Faults with Unhealthy Defaults

de fault (di fáwlt) n. A choice automatically made by someone else.

In 2011–2012, 33% of U.S. children and adolescents consumed fast food on a given day.^{1,2} Children consume an average of 25% of their calories from restaurant foods and beverages,³ and adolescents typically consume about 300 more calories on days when they eat a meal at a fast-food restaurant.⁴

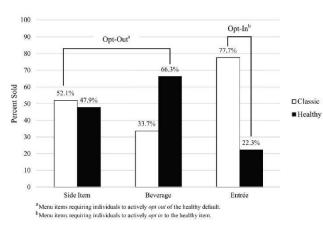
Research shows that people are more likely to choose an option when it is presented as the default. Even when people can "opt out," they are more likely to stick with the default than they are to select the same option on their own. Yet, the default options for side dishes and drinks with



restaurant children's meals are often unhealthy. Providing healthier default options for children's meals is crucial. Healthy defaults support parents by reducing barriers to feeding their children healthfully.

The Power of Defaults

Studies on retirement savings and organ donation show that people often stick with the default option.^{5,6} They also show high acceptability of beneficial defaults.⁷ People lead such busy lives, especially parents, so it can be hard to recognize the choices that are made for us and change them as we see fit. For example, it's easier to accept the bundled kids' meal that comes with a sugary beverage and french fries, than to alter the order to include a water or low-fat milk and apple slices.



Healthy Default Options Support Healthy Eating

Making the standard default options healthier helps people eat healthfully at restaurants.

Children's meals with healthier defaults at Walt Disney theme parks resulted in 21% fewer calories compared to children's meals with unhealthy defaults. Parents stuck with healthy side dishes 48% of the time and healthier beverages 66% of the time, even though trips to theme parks are typically special occasions and more indulgent options were available.⁸

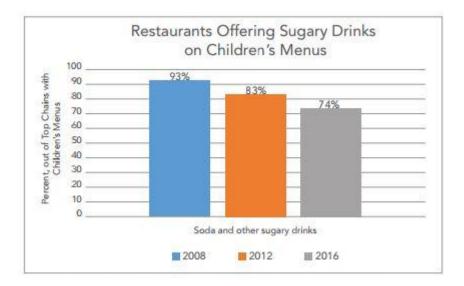
Figure 1. Percent of healthy and classic kids' menu items sold at all Walt Disney World restaurants.

- When a large fast-food restaurant changed the default sides for its children's meals by reducing the size of the fries and adding apple slices automatically, the calories in the average children's meal purchased decreased by 19%.⁹
- A 2015 study reported that sales of strawberry and vegetable sides and milk increased and sales of french fries and soda decreased after a regional chain restaurant implemented a healthier children's menu.¹⁰
- At McDonald's, the change of the default beverage resulted in 21 million more low-fat and fat-free milk jugs and 100% apple juice boxes sold over a period of 11 months compared to the same period a year earlier.¹¹
- A 2015 study reported that more than half the children ages 8 to 12 surveyed who order children's meals said that they would be somewhat or very likely to order a children's meal that came with vegetables (56%) or fruits (79%).¹²

All Restaurants Should Provide Healthy Options as the Default in Children's Meals

Some chain restaurants are offering and advertising children's meals with fruit and vegetable side dishes, such as apple slices, and healthy beverage offerings such as water, seltzer, low-fat milk, or 100% juice.

- However, a study of the nation's top 50 chain restaurants found that 97% of children's meal combinations do not meet expert nutrition standards.¹³
 - One study concluded that only 40% of the top fast-food and 20% of full-service restaurants always include a fruit or vegetable as the default side dish.¹³
 - McDonald's, Subway, Burger King, Wendy's, Applebee's, Panera Bread, Dairy Queen, Jack in the Box, IHOP, and Longhorn Steakhouse have children's menus free from sugary drinks, yet most of the largest chain restaurants still have sugary drinks on their kids' menu. 74% of the top 50 restaurant chains with kids' menus promote sugary drinks through kids' menus, which is down from 93% in 2008. When looking at restaurant chains by the number of locations, this translates to nearly half (43%) of restaurant outlets.¹⁴



Policy Options for Healthy Defaults

Restaurants should support parent's effort to feed their children healthfully by offering healthier side items and beverages as the *default* option with children's meals.

Eleven localities, including Baltimore, Maryland, Lafayette, Colorado, and eight communities in California, have passed ordinances to improve the nutritional quality of restaurant children's meals. The policies generally require that restaurants offer only healthier beverages as the defaults that come with children's meals.¹⁵ Most ordinances passed by unanimous vote,¹⁶ with the support of city officials and residents.¹⁷ San Francisco and Santa Clara County's policies set nutrition standards for restaurant children's meals that are sold with toys.¹⁸





¹ Vikraman S, Fryar CD, Ogden CL. "Caloric Intake from Fast Food among Children and Adolescents in the United States, 2011–2012." NCHS Data Brief September 2015, no. 213. Accessed at http://www.cdc.gov/nchs/products/databriefs/db213.html.

² Powell LM, Nguyen BT, Han, E. "Energy Intake from Restaurants: Demographics and Socioeconomics, 2003-2008." *Archives of Pediatric and Adolescent Medicine* November 5, 2012, vol. 43(5), pp. 498-504.

³ Lin B, Morrison RM. "Food and Nutrient Intake Data: Taking a Look at the Nutritional Quality of Foods Eaten at Home and Away From Home." *Amber Waves* 2012, vol 10(2), pp. 1-2. Accessed at < https://www.ers.usda.gov/amber-waves/2012/june/data-feature-food-and-nutrientintake-data/ >.

⁴ Powell LM, Nguyen BT. "Fast-Food and Full-Service Restaurant Consumption Among Children and Adolescents: Effect on Energy, Beverage, and Nutrient Intake." *JAMA Pediatrics* 2013, vol. 167(1),14–20.

⁵ Clark JW, Utkus SP, Young JA. "Automatic enrollment: The Power of the default." Vanguard Research 2015. Accessed at https://institutional.vanguard.com/iam/pdf/CRRATEP_AutoEnrollDefault.pdf?cbdForceDomain=true>.

⁶ Sheperd L, O'Carroll RE, Ferguson E. "An International Comparison of Deceased and Living Organ Donation/Transplant Rates in Opt-in and Opt-out Systems: A Panel Study." *BMC Medicine* 2014, vol 12(131). Accessed at <

 $https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4175622/pdf/12916_2014_Article_131.pdf>.$

⁷ Halpern SD, Ubel PA, Asch DA. "Harnessing the Power of Default Options to Improve Health Care." *New England Journal of Medicine* 2007, vol. 357, pp. 1340-1344.

⁸ Peters J, Beck J, Lande J, Pan Z, Cardel M, Ayoob K, Hill J. "Using Healthy Defaults in Walt Disney World Restaurants to Improve Nutrition." *The Behavioral Science of Eating* 2016, vol. 1, 92-103.

⁹ Wansink B, Hanks A. "Calorie Reductions and Within-Meal Calorie Compensation in Children's Meal Combos." *Obesity Journal* 2013, vol. 22, pp. 630-632.

¹⁰ Anzman-Frasca S, Mueller MP, Lynskey VM, Harelick L, Economos CD. "Orders of Healthier Children's Items Remain High More than Two Years after Menu Changes at a Regional Restaurant Chain." *Health Affairs* 2015, vol. 11, 1885-1892.

¹¹ McDonald's, Alliance for a Healthier Generation. "McDonald's and Alliance for a Healthier Generation Announce Progress on Commitment to Promote Balanced Food and Beverage Choices," June 25, 2015. Available at http://news.mcdonalds.com/press-releases/mcdonald-s-and-alliance-for-a-healthier-generation-announce-progress-on-commitme-nyse-mcd-1203234.

¹² Anzman-Frasca S, Dawes F, Sliwa S, Dolan PR, Nelson ME, Washburn K, Economos CD. "Healthier Side Dishes at Restaurants: An Analysis of Children's Perspectives, Menu Content, and Energy Impacts." *International Journal of Behavioral Nutrition and Physical Activity* 2014, vol. 11, pp. 81-93.

¹³ Batada A, Flewelling L, Goode A, Wootan, MG. *Kids' Meals II: Obesity and Poor Nutrition on the Menu.* Washington, D.C.: Center for Science in the Public Interest, March 2013. Accessed at < https://cspinet.org/resource/kids%E2%80%99-meals-ii>.
¹⁴ Ribakove S, Almy J, Wootan MG. *Soda on the Menu: Improvements Seen but More Change Needed for Beverages on Restaurant Children's Menus.* Washington, D.C.: Center for Science in the Public Interest, July 2017.

¹⁵ Davis Municipal Code ch. 17.02 (2015); Stockton Municipal Code ch, 5.70 (2016); Perris Municipal Code ch. 7.46 (2017); Santa Clara County Code of Ordinances div. A18 ch. XXII (2017); Berkeley Municipal Code ch. 12.72 (2017); Code of Ordinances, City of Lafayette, Colorado ch. 55 art. IX (2017); Cathedral City Municipal Code ch. 5.92 (2017); Long Beach Ordinance ORD-17-0027 (2017) (to be codified as Chapter 8.17); Daly City Ordinance 1415 (2018) (to be codified as Chapter 8.72); Baltimore Ordinance 17-0152 (2018) (to be codified at § 6-508).

¹⁶ Davis City Council, Meeting Minutes for June 2, 2015,

http://documents.cityofdavis.org/Media/Default/Documents/PDF/CityCouncil/CouncilMeetings/Minutes/2015/Minutes-2015-06-02-City-Council-Meeting.pdf; Stockton City Council, Meeting Minutes for June 7, 2016,

http://stockton.granicus.com/MinutesViewer.php?view_id=48&clip_id=5632; Perris City Council, Recorded Meeting of March 15, 2017, http://perris.granicus.com/MediaPlayer.php?view_id=4&clip_id=1204; Berkeley City Council Ordinance No. 7560, https://www.cityofberkeley.info/Clerk/City_ Council/2017/07_Jul/Documents/2017-07-

11_Item_01_Referral_Response__Healthy_Default_Beverages.aspx; Santa Clara County Ordinance No. 300.908, https://sccgov.iqm2.com/Citizens/FileOpen.aspx?Type=4&ID=159777; City Council of Daly City Recorded Meeting of January 8, 2018, http://sireweb.dalycity.org/sirepub/mtgviewer.aspx?meetid=1023&doctype=AGENDA; Baltimore City Council, Journal for March 12, 2018, https://baltimore.legistar.com/View.ashx?M=M&ID=578897&GUID=72DF0989-EBA7-4140-A987-89A98BD61096.

¹⁷ See, e.g., Voices for Healthy Kids Action Center, Stockton, CA Passes "Healthy-by-Default" Kids' Meal Beverage Ordinance June 16, 2016,https://www.voicesactioncenter.org/Inside-Track-June-17-16-c (quoting Stockton Vice Mayor Christina Fugazi); Veronica Rocha, "City of Davis Sours on Sweet Drinks for Kids' Meals in Restaurants," Los Angeles Times November 14, 2015. Accessed at http://www.latimes.com/local/ lanow/la-me-ln-davis-sweet-drinks-kids-meals-20150528story.html.

¹⁸ San Francisco Health Code art. 8 §§ 471.1-417.9 (2010); Santa Clara Municipal Code Chapter 21. Section A18-352 (May 2010).