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An analysis of breakfast cereals marketed to children in the UK with specific regard to oral health

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Background: Breakfast cereals remain popular with children and although they are mainly eaten at breakfast time they are regularly eaten between meals because they are quick and easy to prepare. In the UK breakfast cereals are promoted using a wide variety of marketing techniques via a range of media (e.g. TV, radio, magazines, social media) concepts such as the healthy breakfast option and a good way to start the day or fuel your day predominate. However, many breakfast cereals contain high levels of sugar, some reaching 35% or more. Regular consumption of high sugar breakfast cereals is of concern both from a dental and a general health perspective because of the relationship with dental caries and excess energy intake which could potentially lead to obesity and/or diabetes.

Objectives: The aim of this study was to ascertain how breakfast cereals in the UK are specifically marketed to children in terms of the nutritional messages portrayed, especially in terms of oral health, both via the written word and visual images.

Methods: 13 of the most popular UK children's breakfast cereals, including branded and supermarket own-brand versions were selected for this study. A content analysis was performed using the packaging of each breakfast cereal type, which involved a detailed analysis of the imagery and claims made, together with an assessment of the nutritional content. An additional case study of the most popular brand was undertaken to assess wider media advertising via the internet and social media.

Results: Four of the nine breakfast cereals contained high levels of sugar according to the UK Traffic Light System which categorizes high as in excess of 22.5%; Kellogg's Frosties contained 37% sugar. The remaining 5 cereals had between 4.4% and 21.4% of sugar. With regard to salt and fat, all cereals analyzed were labeled as either containing low or medium levels. Supermarket own-brand versions did not differ in nutritional content when compared with the market leader. Nutritional claims focused on vitamins especially folic acid, iron, whole grains, and no artificial colors or flavors and these were legitimate in terms of nutritional content. Only two opted for the voluntary Front of Pack traffic-light system and these were the supermarket own-brands. A range of marketing techniques were employed, e.g. cartoon characters, royal endorsements, QR codes. The imagery surrounding portion size was grossly misleading.

Conclusion: Some breakfast cereals marketed to children in the UK have very high levels of sugar and the manufacturers use legitimate claims about other nutritional constituents to potentially mislead consumers into thinking the breakfast cereals are healthy. Furthermore, the imagery surrounding portion size is of particular concern when actual portion sizes should be at least a third less than those portrayed on food packaging. Dental and other health professionals need to be aware of the high sugar content of these cereals and the marketing techniques employed by their manufacturers when giving nutritional advice to children and parents.

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