Conflicts of interest in the "war" against obesity: is it possible serve two masters?

Conflitos de interesse na "guerra" contra a obesidade: é possível servir a dois senhores?

Alexandre Palma

Doctorate in Public Health, Escola Nacional de Saúde Pública da Fundação Oswaldo Cruz (ENSP/FIOCRUZ). Lecturer, Postgraduate Program Stricto Sensu in Physical Education, Universidade Federal do Rio de Janeiro (UFRJ).

E-mail: palma_alexandre@yahoo.com.br

Nilda Teves Ferreira

Doctorate in Education, Universidade Federal do Rio de Janeiro (UFRJ). Lecturer, Postgraduate Program Stricto Sensu in Exercise and Sports Science, Universidade Gama Filho (UGF).

E-mail: tevesnilda@uol.com.br

Murilo Mariano Vilaça

Doctorate in Philosophy, Universidade Federal do Rio de Janeiro (UFRJ) and in Education, Universidade do Estado do Rio de Janeiro (UERJ). Researcher, Fundação Oswaldo Cruz (EPSJV/FIOCRUZ) and Senior Lecturer, Universidade Federal do Rio de Janeiro.

E-mail: contatoacademico@hotmail.com

Monique Assis

Doctorate in Physical Education, Universidade Gama Filho (UGF). Lecturer, Universidade do Estado do Rio de Janeiro (UERJ).

E-mail: monique_assis@uol.com.br

Correspondence

Alexandre Palma

Rua José Veríssimo, 14/101, Méier, Rio de Janeiro, RJ, CEP: 20720-180.

Abstract

Different and numerous studies have attempted to demonstrate that obesity and sedentary lifestyle have high prevalence rates in the world and in Brazil. The "war", however, has been fought many times against the obese and sedentary, as opposed to combating specific conditions. Moreover, it is not uncommon to find junk food manufacturers associated with scientific entities. The objective of this study is to examine the presence of potential conflicts of interest in the relationship between the sponsoring companies and scientific organizations that develop actions to stimulate body fat reduction and physical activity. The websites of seven scientific institutions were investigated through the methodology of discourse analysis. Initially, we looked for companies sponsoring events or prizes promoted by such institutions. We examined all the events and prizes available between the years 2012 and 2013. Of the seven institutions surveyed, three had some association with manufacturers of junk food. Results showed that: a) the insistence in encouraging behaviors associated with regular physical activity, healthy eating habits and the intention to reduce obesity and improve health, b) the involvement of different companies in the industry food considered unhealthy, and c) the ability to engage different professional and scientific organizations. We can conclude that there is inconsistency between the rhetoric and the actions of institutions and great conflict of interest.

Keywords: Conflict of Interest; Obesity; Sedentary Lifestyle; Food Industry.

Resumo

Diferentes e numerosas pesquisas têm tentado demonstrar que a obesidade e o sedentarismo apresentam elevadas taxas de prevalência no mundo e no Brasil. A "guerra", no entanto, tem sido travada, muitas vezes, contra os obesos e sedentários, ao contrário de combater as referidas condições. Além disso, não é raro encontrar os fabricantes de alimentos ultraprocessados associando-se a entidades científicas. Nesse sentido, o objetivo deste estudo é examinar a presença de potenciais conflitos de interesse nas relações entre as empresas patrocinadoras e as organizações científicas que desenvolvem ações de estímulo à redução da gordura corporal e ao aumento da prática de atividades físicas. Foram investigados, por meio da análise do discurso, os sítios eletrônicos de sete instituições científicas. Inicialmente, procurou-se por empresas patrocinadoras dos eventos ou prêmios promovidos por tais instituições. Foram examinados todos os eventos e prêmios disponíveis entre os anos 2012 e 2013. Das sete instituições investigadas, três apresentaram alguma associação com empresas fabricantes de alimentos ultraprocessados. Dos discursos analisados chamou a atenção: a) a insistência em afirmar que se busca incentivar comportamentos associados à prática regular de atividades físicas, à alimentação saudável e ao propósito de reduzir a obesidade e melhorar a saúde; b) o envolvimento de diferentes empresas do setor de alimentos considerados não saudáveis; e c) a capacidade de envolver diferentes profissionais e organizações científicas. Conclui-se, então, haver certa incoerência entre os discursos e as ações das instituições e claro conflito de interesses. Palavras-chave: Conflito de Interesses: Obesidade: Estilo de Vida Sedentário: Indústria Alimentícia.

Introduction

Being sedentary and obesity are two conditions that are often considered to pose a risk to the individual and to society, as far as they are viewed as pathogenic. There have been a variety of studies attempting to demonstrate that both are highly prevalent globally and in Brazil, constituting a real epidemic (Varo et al., 2003; Florindo et al., 2009; Flegal et al., 2012; Gigante et al., 2009; Hilton et al., 2012).

Despite other analyses of these issues underway, questioning some of the hypothesis and conclusions of epidemiological studies (Campos et al., 2006; Palma and Vilaça, 2010; Gard and Wright, 2005), in the current hegemony both being sedentary and obesity are being approached as something to be tackled. Suggestive expressions such as "combat", "fight" and "war" are commonly used in scientific work (Paradis, 2012; Alpert, 2010; Jain, 2004).

This "war", however, has often been waged against the obese and the sedentary, rather than against the above mentioned conditions. In other words, the messages of health campaigns and scientific articles can frequently be perceived more as a type of discrimination and stigmatization rather than an aspect to motivate changes in habits and prevent diseases (Puhl et al., 2012; Rail et al., 2010; Campos et al., 2006; Palma and Vilaça, 2010; Gard and Wright, 2005).

Some aspects of diet that have been associated with obesity are drinking soft drinks, eating biscuits, sweets, chocolate and fast food, among others. Although the consumption of such foods may not be increasing, it is still deemed to be high (Jensen et al., 2012; Denney-Wilson et al., 2009; Vartanian et al., 2007), corroborating this association. In Brazil, a telephone survey to identify risk factors for chronic disease (Vigitel) in 2011, found that the frequency of adults questioned who reported consuming industrialized drinks (soft drinks) - including both diet and non-diet versions and artificial fruit juices -, five days a week or more, varied between 11.5% in Natal to 42.5% in Porto Alegre (Brasil, 2012). In 2007, the variation was between 21.0% in Aracaju and 38.4% in Macapá (Brasil, 2008).

Although these foodstuffs may contribute to certain health problems, it is not uncommon to find their manufacturers associated with scientific enti-

ties (Gómez et al., 2011; Heim, 2010). Thus, the aim of this study is to examine the presence of potential conflicts of interest in the relationships between the sponsoring companies and the scientific organizations developing actions aimed at reducing body fat and increasing the practice of physical activity. We also aim to analyze some of the messages that are associated with these sponsors.

Considering what we will call the "Matthew Principle", based on the idea that it is impossible to serve two masters1, we aim to provide a normative criticism of the conflict between public (public health) and private (profit regardless of harm done to health) interests that is spreading in Brazil. The economic power enjoyed by mega-companies in the food and drink industry - and this is our hypothesis - is distorting the image and, perhaps, the autonomous functioning and exemption of certain scientific bodies. Financially seduced by the sponsor (Goethe, 2003)2, they are yielding themselves up to a problematic association with such companies, contributing to the branding equity (attributing value to the brand and to its products; the "strength" of a brand in the market) of those whose products are considered, by the entities themselves, as harmful to health, creating a dilemma foreseen in the above mentioned principle.

Method

To conduct this study, an analysis was conducted of the sponsors of certain events (congresses, symposiums, etc.) and prizes for scientific bodies. The scientific entities were chosen according to two criteria: a) clearly taking up a position of combating being sedentary and/or obesity; and b) having great relevance in this field. Thus, the following institutions were selected for analysis: Sociedade Brasileira de Medicina do Esporte (Brazilian Society of Sports Medicine); CELAFISCS /

Agita São Paulo; Sociedade Brasileira de Atividade Física e Saúde (Brazilian Society of Physical Activity and health); Associação Brasileira de Nutrição (Brazilian Association of Nutrition); Associação Brasileira de Nutrologia (Brazilian Association of Nutrology); Associação Brasileira para o Estudo da Obesidade e da Síndrome Metabólica (Brazilian Association for the Study of Obesity and Metabolic Syndrome); Sociedade Brasileira de Endocrinologia e Metabologia (Brazilian Society of Endocrinology and Metabolism).

Each institution's website was analyzed. At first, we looked at the firms sponsoring the events or prizes promoted by such institutions. We looked at all the available events or prizes for the years 2012 and 2013. All messages and documents available on each website were read carefully at least twice. The first reading allowed us to verify whether there was a sponsor, how many companies and of which type. The second reading was to filter the texts with messages relating to the association between the institutions, being sedentary, obesity and overall health.

Later, the texts were analytically interpreted and then these interpretations were debated among the authors. Finally, a final analysis of the groups on the meanings communicated by the messages was produced. From this a broad analysis, such as that performed by Serra and Santos (2003) and Palma et al. (2012), was produced in which the following aspects were considered: a) the title of the message as, among other functions, the title attracts the reader's attention to certain meanings, serving to motivate them to read and directing their reading; b) who is speaking, as, depending on whom the discourse is attributed to, it acquires greater or lesser legitimacy and, therefore more or less identification with the reader; c) what is being said, the explicit and/or implied meanings and significance of the discourse; d) the intermediary, the speaker does so according to the editorial profile that interests

^{1 &}quot;No one can serve two masters; either he will hate one and love the other, or be devoted to one and despise the other. You cannot serve both God and Mamon". The Holy Bible, Book of Matthew, Chapter 6, verse 24 (Matthew, s/d.).

² In the biblical context, the reference to Mamon, a transliteration of the Hebrew term for money, is a criticism of greed and avarice, a meaning that spilled over into secular literature, as seen in Johann Wolfgang von Goethe's Faust [1806]. In the dialogue between the eponymous hero and Mephistopheles, Faust curses Mamon saying, in a paraphrase, that it can encourage men to reckless exploits or idle pleasure, drawing upon the promise of riches, which shows how the focus on monetary return can lead us to harmful attitudes or postures (Goethe, 2003).

the vehicle, and this is connected to the sponsors' interests; and e) the way the discourse is given, that is, the form in which the method is out across to the technical-scientific statement.

Results and discussion

Of the seven scientific organizations investigated, three (CELAFISCS / Agita São Paulo; Brazilian Association of Nutrology and the Brazilian Association for the Study of Obesity and Metabolic Syndrome) had some kind of association with companies producing foods with high glycemic index and/or poor nutritional value.

The CELAFISCS is a scientific institution bringing together different professionals from the areas of Health and Sport sciences. One of its largest products is the "Agita São Paulo" program. More recently, they have also been largely responsible for spreading the idea of Exercise is Medicine® in Brazil.

Annually, this institution organizes one of the largest scientific congresses dealing with physical activity in Brazil, the "International Sports Science Symposium", which had its 36th edition in 2013. On the events website3, the link to "sponsors" gives access to information that possible sponsors and exhibitors need in order to make financial decisions, such as size of stand, sum to invest, type of sponsorship, etc. Next, there is a photograph of the sponsor in the VIP room of the 2012 event⁴, Nestlé[®]. This giant of the food industry produces countless types of chocolate, ice-cream, biscuits, cereal and condensed milk, among other products. Although such products may contribute to obesity and the institution is struggling strongly against this condition, the CELAFISCS / Agita São Paulo groups did not appear to be uneasy about the contradiction involved in associating the brands (Agita São Paulo-Nestlé®). Moreover, in the sponsor and exhibitor information, there is no restriction on the type of company. Thus, Nestlé® must not have come across any impediment to sponsoring the event.

In the 2012 event, the group launched the *Exercise is Medicine*® project by the *American College of Sports Medicine*. According to a document available on one of the websites connected to CELAFISCS / Agita São Paulo⁵,

'Exercise is Medicine' - EIM (trademark) is an initiative to encourage doctors working in primary care and other health care providers to include exercise in the treatment plans they draw up for their patients, EIM emphasizes the need to regularly evaluate exercise ad physical activity throughout medical services as an integral part of preventing and treating disease.

Moreover, the General Manager of CELAFISCS, Coordinator of the *Exercise is Medicine* program in Brazil⁶,

Symposium 2012, another success!

[...]

Note - Exercise is Medicine Brazil

[...]

We believe that a doctor should have access to scientifically based knowledge and evidence to become one more ally in promoting health, and not another barrier to patients doing regular physical activity due to lack of knowledge. We are certain that this type of initiative will contribute to more doctors at least TALKING to their patents about physical activity and thus more and more professionals will be prepared to care for the population who have the basic right of every human to move!

Neither the doctors nor Physical Education professionals have the right, given all the scientific evidence available from the last two decades, to

³ CELAFISCS, International Sports Science Symposium. Available at: http://www.simposiocelafiscs.org.br/ Accessed: 14 January 2013.

⁴ Also CELAFISCS, International Sports Science Symposium Annals. Available at: https://www.dropbox.com/s//g4wyecq4koop723/simposio2012_anais.pdf. Accessed: 14 January 2013.

⁵ CELAFISCS, Exercise is Medicine - EIM. Available at: http://www.simposiocelafiscs.org.br/material/2012/arquivos/EIM_factsheet-br. pdf. Accessed: 14 January 2013.

⁶ CELAFISCS, Simpósio Internacional de Ciências do Esporte. Available at: http://www.simposiocelafiscs.org.br/index.php?option=com_content&view=article&id=20&Itemid=18. Accessed: 14 January 2013.

condemn anyone to be, or continue to be, sedentary. There is a consensus that in the 21st century it is completely unethical on the part of the health care professional to deny the patient the right to know the more than twenty benefits of physical activity for the physical, mental, cognitive and social health of the human being [sic].

The title of the message makes it clear that, once again, it had been a great event. The subtitle is quite direct and shows that it deals exclusively with the new project. The discourse is by the General Manager of CELAFISCS, coordinator of the project in Brazil, that is, someone hierarchically important to take responsibility for presenting or talking about the project and the vehicle is the entity itself, certifying the initiative. In this specific case, we were extremely interested in what was said. According to Orlandi (1996), it is in the articulation between the paraphrase (producing the same meaning with different ways of expressing it) and the polysemy (producing multiple meanings) that discourse is produced. Thus, by stating that a doctor should have access to scientifically based knowledge and [sic] evidence, the speaker says, in other words, that up until that moment that professional could not achieve such knowledge and, therefore, had himself been a barrier to his patients doing regular physical activity. Thus, the professional is negligent for not having studied the issue sufficiently, and responsible for the patient not doing physical activity and not being healthy.

Next, the word "right" appears three times. It speaks of the individual's right to move, and that professionals do not have the right to deny their patients doing physical activity or having knowledge of the benefits. It also declares that it is unethical to impede this access. The effect of the paraphrase (constantly reinforced discourse) is strongly present here and intensifies the idea of blaming the health care professionals for the patients' attitudes.

The discourse continually repeats one single idea. The paraphrasal and monotonous tone represented by the words "right" and "access", reveal the rhetorical emphasis on the idea that they aim to transmit, while ruling out any other possible interpretation. The speaker is, without a doubt in the sphere of power relationships, using two types

of discourse with relevant strategic effect. The intentions are simultaneously enveloped in an aura of scientific proof (scientific facts) and politicallegal goods (guaranteeing access and rights). They could even be understood as a coercive command, something to be implemented by force and obeyed, a "right".

When reflecting on "access" or "rights", issues related to the State, its prerogatives and limits immediately come to the fore. Considering that pluralist societies are open to discourse of the broadest varieties, in our understanding, the political proposal to be extracted from the texts cited above appear controversial. We view that which the statements propagate as lifestyles proposals that do not necessarily express "civic life". The abstract idea of citizenship as a fundamental and general form of belonging to a specific community, of universal access to a set of rights concerning collective goods, such as education, health, housing, employment and provision should, to our mind, be accompanied by the principles of self-determination and individual freedom. The issue of citizenship, undoubtedly focused on the individual's relationship with the State and that of individuals (as citizens) between themselves (Ferreira, 1993), for us, has to keep the "socio-political risk of oppression" as a constant guideline.

There is no concern, at least not explicitly, with complex social determinants and effects relating to obesity and the obese. Not discussing the logic of the free market - based on the liberty enjoyed by companies to produce products that, in theory, are harmful to citizens' health, who the State should, in principle, protect - appears to corroborate this statement. What the discourse reveals is not a political view of citizenship, based on the idea of polis, that is, founded in the co-responsibility inherent to societal co-belonging that life in the community imposes. In contrast, what we find here is citizenship based on idiocy, that is, concentrated on life, on personal interests, a proposal of individual citizenship imposing on the subject partial or complete responsibility so that he and his personal choices are completely free.

Moreover, the discourse aims to establish an overlap between Science and the State. Despite the

uncertainties of scientific knowledge and of the interests at stake in it, bets are on normative social control based on domesticating lifestyles.

When the word "rights" is used, it brings with it an element of obligation. The difference is that obligation no longer refers to collective but to individual behavior. The obligation of the State/Science is to fulfill their obligations, although no longer obligations concerning coexistence and common good, but rather obligations to the body and to health. It is possible that the fines the individual faces will no longer be for crimes and infractions affecting the social body but will also concern threats to their own health posed by being sedentary or by obesity, as discussed by Palma et al (2012).

The stage is set. According to the American College of Sports Medicine, around \$117 billion are spent on treating obesity annually in the form of weight reducing strategies (American College of Sports Medicine, 2009). Others studies have estimated the values to be even higher, up to around US\$ 147 billion annually on treating obesity and related diseases (Finkelstein and Strombotne, 2010). On the other hand, although Finkelstein and Strombotne (2010) associate the increase in obesity with increased consumption of high calorie foods such as soft drinks and sweets, and reduced energy expenditure in leisure time spent watching television, playing video games or on the computer instead of doing physical activity, they do not approach - much less criticize - the financial gains of the companies manufacturing such products, such as Coca-Cola®, Nestlé® or Samsung®. In other words, certain authors, when dealing with the "obesity economy", fail to consider that different companies have earned high profits from facilitating an "obesogenic" or "sedenterogenic" environment. At the same time, they place the responsibility for these conditions mainly or solely on the subjects.

Certain personal choices are being viewed as crimes, justifying repressive actions against such behavior that disturbs the social order. In people's day-to-day lives, the effect of medicine is not only that of treatment, there is also a normative function. Control is sought of bodies, not of health. Currently, being a "good" citizen has come to mean slim and physically active. Medical discourse rationalizes all

aspects related to the health/disease binomial creating a myriad of causal links which are internalized as truths and followed with dogmatic deference by individuals, believing themselves to be prolonging their lives.

The title of the commentary of the formation of the modern state, as thought of by Hobbes (1983), for example, it is possible to infer similarities between the coercive power of the state and medical power. Hobbes understands that self-preserving of life is what determines the meaning of human actions, but it falls to the State to govern the various strategies of individual self-preservation, forming a social contract, as they tend to introduce a state of war of every man for himself, placing life at imminent risk. Thus, it is in the name of self-preservation mediated by an impersonal political entity that individuals should give up part of their liberty. For Hobbes (1983), the possibility of peace, then, should be seen as a result of a pact, a social contract between individuals and, it is therefore not necessary to renounce the Natural state and create the Civil State, from which come not only the individual's rights and obligations, but also social justice and morality.

Medicine preaches prolonging life. In other words, it aims to promote self-reservation. Analogously, we have a pact, a social contract with medical knowhow. It is constantly seen how important it becomes for the subject to establish a contractual relationship with medicine. It is as if "composite rights/ obligations" were created, that is "civil-biological", with tones of "natural rights". The individual has the right and the obligation to know their cholesterol, triglycerides and glucose rates etc., to know what is good for the health and what should or should not be eaten and also where such information can be obtained, steering their life in the direction seen as correct. Thus, there is a mix of scientific, political and moral factors that are realigned, forming an efficient, albeit questionable, bio-political device

In our incoherent "Science State", although there is "scientific proof" indicating the negative effects of what is consumed by the population, it is not advisable to go to war against the large companies that produce them, as in the case of the manufacturers of high calorie foodstuffs, as the economic dynamic on which political organization is based depends on

them. Thus, the evils (as obesity and being sedentary are seen) should be attacked by the individual themselves, as it is up to them to make certain choices and decisions regarding products in the free market, due to a state policy of non-intervention in the economy. In other words, as the companies, although, according to the logic, they produce harm, are partners in the reigning economic system, the chosen enemy is lifestyle choices, that is. The war is "internal", the individual against themselves, against their desires, struggling for self-control.

Hobbes (1983) also reflects in the issue of power. To summarize, according to him the only way in which to establish common power able to guarantee all individuals enough security, is to confer all strength and power on one man, or on an assembly of men, so as to reduce plurality of wills to one single will. The locus of contemporary power appears to have embraced medical discourse so as to curb man from harming himself, aiming to strengthen one type of single will, the "will to be healthy". Promoting this is linked to another Hobbesian idea that seems pertinent to adduce here: that of "fear". Fear of disease and of death is fundamental, consistent with Hobbes's thinking (1983) when he says that the role of the State is to spread the idea of fear as a mechanism to inhibit disorder. Fear in order to achieve political peace can be, by analogy, compared to pathogenic fear to achieve "biological peace": the fear of a heart attack, a stroke, cancer or even of social rejection acts to inhibit biological disorder as represented by obesity, motivating individuals to "look after their health properly". In this new social organization, moral bad habits, such as laziness and greed remain on the list of deadly sins, now updated and renamed as being sedentary and obesity.

There are also other reflections on this, not said in the discourse, the first aspect refers to medicalizing the practice of physical activity, as physical activity is treated as a remedy: the second refers to the project with $\operatorname{Coca-Cola}^{\otimes_7}$.

On the Exercise is Medicine® program website, in the United States, in the topic aimed at doctors and health care professionals, the following message can be found: "What if there was one prescription that could prevent and treat dozens of diseases, such as diabetes, hypertension and obesity? Would you prescribe it to your patients? Certainly"8. Our question is: What if there were foodstuffs, such as soft drinks, biscuits, chocolate, fats food etc. that could contribute to triggering dozens of diseases such as diabetes, high blood pressure and obesity? Would you recommend your patients to avoid them? Certainly... we cannot state that the association is stated in this way, as the program has clear relationships with Coca-Cola®.

Coca-Cola® has invested in intense publicity to link its image with that of health. On the website, there is a link "Vida Saudável" (healthy lifestyle), establishing a responsible dialogue towards improving the population's health. According to the website itself, this involves9, physical activity and eating well.

Vida Saudável

Coca-Cola believes in an active [sic] and healthy lifestyle.

For Coca-Cola, promoting an active and healthy lifestyle is essential. This is possible thanks to a balanced diet, combined with physical activity, two topics on which this company places special emphasis.

To achieve success, the company appears to encourage certain programs or projects. Of these, we highlight three:

Coca-Cola Cup - The biggest football tournament for adolescents from Brazil.

The Coca-Cola Cup is the biggest football tournament aimed at adolescents aged 13 to 15. The tournament promotes an inclusive experience for players and their families in communities in 27 Brazilian

⁷ Exercise is Medicine. Available at: http://www.exerciseismedicine.org. Accessed: 14 January 2013.

⁸ Exercise is Medicine. Physicians and Health Care Providers. Available at: http://www.exerciseismedicine.org/physicians.htm. Accessed: 14 January 2013.

⁹ Coca-Cola. Viva Positivamente. Available at: http://www.vivapositivamente.com.br/vida.html. Accessed: 15 January 2013.

cities, stimulating socialization associated with a feeling of pride and belonging and encouraging an active and healthy lifestyle through football

Program encouraging physical activity and healthy eating

Coca-Cola sponsors the "Prazer de Estar Bem" - Joy of Being Well - Program, conducted by the Federation of Industries of São Paulo (Fiesp). The main objectives of this initiative are: to reduce childhood obesity in this country and to educate the young and adults on the practical benefits [sic] of physical activity and healthy eating habits. The program takes place in 285 schools in the state of São Paulo. In total, 235 thousand pupils and their families benefit from it.. 'Prazer de Estar Bem' is an initiative by the Federation of Industries of São Paulo (Fiesp) [...] supported by Coca-Cola Brazil, Kraft, Nestlé, Unilever and Sadia, the program aims to raise awareness of the importance of physical activity and how to eat healthily. [...] the program includes consultations with doctors, nutritionists and physical education professionals to help the pupils with tips on nutrition. Leaflets were also distributed containing guidance on eating habits and suggestions for physical activity.

Coca-Cola Brazil awards the Pemberton Prize 2009

The Pemberton Prize encourages research in the area of health. / Three scientific studies [sic] related to healthy living will receive R\$55,000.00 from COCA-COLA Brazil. / The Pemberton Prize is aligned with the pillar of an active and healthy life, supporting the platform of sustainability Viva positivamente. / In the first edition, 140 scientific studies conducted by professionals from the areas of Medical Science, Biomedical Science, Physical Education and Pharmacology from 63 universities and research centers all over the country were analyzed. / The prize was awarded during the Mega Nutrition Event in São Paulo. [...] During the award

ceremony, Marco Simões, vice-president of Communication and Sustainability, COCA-COLA Brazil emphasized the quality of the studies awarded the prize. "Establishing a prize for scientific research has significant results for the country. We are extremely satisfied with the result of this initiative and with the quality of the studies presented", he explains. The winner thanked the participants and the initiative of COCA-COLA Brazil. "I would like to thank and congratulate COCA-COLA Brazil for the opportunity and for the concern for the population's quality of life", stated Gonçalves. The president of Brazilian Association for the Study of Obesity and Metabolic Syndrome (ABESO), Márcio Mancini, explained how the association valued initiatives such as this. "ABESO has supported the Pemberton Prize since it was launched, as encouraging scientific research is in line with the association's objectives. We support initiatives aimed at health eating and lifestyle", he emphasized.

In the excerpts of discourses here, certain points attract attention: a) the insistence on stating that they seek to encourage behavior associated with regularly doing physical activity and the proposal to reduce obesity and improve health; b) the involvement of different companies from the sector of foods considered to be unhealthy, such as Coca-Cola®, Kraft® (producer of Lacta® chocolates), Nestle®, Unilever® (manufacturer of Kibon® ice-cream Karo® corn syrup based products) and Sadia®; etc. The capacity to involved different scientific professionals and organizations.

On this latter point, specifically, it is worth noting that certain scientific institutions, which should preserve themselves from such associations and combat consumption of these foodstuffs, seem to have given in to the economic pressure exercised by mega-companies. The Brazilian Association of Nutrology¹⁰, for example, presents Nestlé^{®11} as a partner. Moreover, together with the Brazilian As-

¹⁰ Associação Brasileira de Nutrologia. Our partners. Available at: http://www.abran.org.br/index.php?option=com_content&view=article &id=59&Itemid=30. Accessed: 15 January 2013.

In the course of conducting this work we also discovered the existence of the Henri Nestlé Prize, aiming to "encourage and value Brazilian scientific output in the areas of Food, Nutrition, Health and Wellbeing, awarded to professionals and undergraduate and postgraduate students from different regions of the country". The Prize is supported by the following scientific bodies: Brazilian Association of Nutrology; Brazilian Society of Food and Nutrition; Brazilian Society of Food Science and Technology; Brazilian Society of Pediatrics; and Brazilian Society of Parenteral and Enteral Nutrition. Cf. NESTLÉ. Prêmio Henri Nestlé. Available at: http://www.nestle.com.br/phn/ApoioEntidade.aspx. Accessed: 15 January 2013.

sociation for the Study of Obesity and the Metabolic Syndrome¹² it is allied with Coca-Cola[®] in the above mentioned Pemberton Prize¹³.

The Pemberton Prize will award a total of R\$ 110,000.00. The winner will receive R\$ 40,000.00, half to the researcher and half to the scientific institutions. Moreover, the winners will travel to the United States and to Rio de Janeiro, depending on position, to visit the company's laboratories.

In this study, the aim is to emphasize the statement referring to the launch of the third edition:

Launch of the 3^{rd} Edition of the Pemberton Prize brings together specialists in the Nutrology Congress

Coca-Cola Brazil launched the 2012/2013 edition of the Pemberton Prize on the 21st September, during the closing dinner of the XVI Brazilian Nutrology Congress. The ceremony was hosted by Dr. Durval Ribas Filho, president of the Brazilian Nutrology Association (ABRAN), who emphasized the importance of the prize in encouraging the development of scientific research in this country. Ilton Azevedo, director of Regulatory Affairs and the Environment at Coca-Cola Brazil and president of the Pemberton Prize Science Council, highlighted the interest Coca-Cola Brazil has in rewarding scientific research developed in this country that contributes to spreading the importance of adopting a more active lifestyle. "It is the best known brand in the world, valuing the application of scientific knowledge in order to mark out the development of drinks integrated into the company's portfolio and to promote a more active lifestyle, valuing Brazilian researchers and scientific research in our universities.", he commented.

"The scientific community is very encouraged and recognizes the importance of a prize such as this that values the researchers. For this reason, I would like to congratulate Coca-Cola Brazil for the initiative of launching the Pemberton Prize within a scientific congress promoting interaction between medical specialists", praised Dr. Durval a

member of the Science Council that evaluated the studies. "I am in favor of the technical-scientific partnership between ABRAN and Coca-Cola, as both aim to spread the scientific reality and de-mystify rumors that are often stronger than real scientific evidence", he said...

For Dra. Leila Araújo, vice-president of the Brazilian Association for the Study of Obesity and Metabolic Syndrome (ABESO) and member of the Pemberton Prize Science Council, the award is a pioneering attitude on the part of Coca-Cola, aimed at diversifying their actions guided by a vision of healthy living. "In the universities, it is often difficult to conduct research due to the lack of investment to fund them. The Pemberton Prize will overcome such needs and encourage young scientists. We are very happy, in the name of the ABESO, for the initiative of a company that has offered an increasing variety of low calorie drinks to those on diets, facilitating lifestyle changes", she recognized.

Dr. Fábio Ancona, vice-president of the Brazilian Society of Pediatrics (SBP), is another member of the Science Council and agrees with the prize's positive mission. "Whenever someone encourages research in this country, creating an award, it is another stimulus for researchers and students who have the opportunity to find the vocation for research within themselves. It is a very important incentive for dedication to this work. And I view my participation in this council as an homage to pediatrics who will be duly valued", he emphasized.

According to Silvia Cozzolino, vice-president of the Brazilian Society of Food and Nutrition (SBAN), as well as contributing to developing research the Pemberton Prize values professionals in the health area. "Any award for research is very welcome, as it encourages young scientists to invest in the area and contributed to developing science in Brazil. SBAN aims to spread scientific knowledge and value health care professionals and, with this initiative, Coca-Cola Brazil also contributes to our objectives", she stated.

¹² Brazilian Association for the Study of Obesity and the Metabolic Syndrome. Available at: http://www.abeso.org.br/lenoticia/249/inscricões-abertas---premio-pemberton.shtml. Accessed: 15 January 2013.

¹³ Pemberton Prize. Available at: http://www.premiopemberton.com.br/noticias.html. Accessed: 15 January 2013.

For Dr. Ancona, bringing companies and medical societies together encourages the development of public practices that benefit all of society. "I strongly believe in the ethical association between private enterprise and medical entities, as it enables exchange of experience. Today companies in the nutrition industry are aware of health, which is extremely positive. Medical societies function as advisory bodies to improve products and to create educational campaigns promoting education about nutrition. Thus, the consumer will know when to use each product and everyone's a winner".

The title of the message straightaway seeks to activate the idea that a group of specialists in nutrology are involved, although it does not enable us to know for sure how these specialists view the relationship. Thus, the title plays the double role of involving those in the know about the topic and awakening the reader's curiosity about what they say.

The speaker talks about the company promoting the Prize, Coca-Cola®. However, various passages "invite" certain individuals to take part in the discourse. A Coca-Cola® executive highlights the company's interest in contributing to a "more active lifestyle". Considering that, in many cases, obesity is the result of the imbalance (consumption > expenditure) between calorie consumption (foodstuffs) and expenditure (physical activity) and that soft drinks can play a significant role in this situation, especially in children, encouraging a more active life should control this imbalance. Therefore. the statements by the experts - the president of the Brazilian Association of Nutrology, vice-president of the Brazilian Association for the Study of Obesity and the Metabolic Syndrome, vice-president of the Brazilian Society of Pediatrics and vice president of the Brazilian Society of Food and Nutrition-, contain a problematic rhetoric and certain statements need to be explained/proven.

The specialists often attempted to legitimize the relationship between the scientific bodies and the company through its encouragement of scientific research. When a company, whose ultimate aim is to make a profit and clearly has economic interests at stake, offers this type of incentive, it is plausible to assume that there is some financial

return for them. Even though the relationship may be questionable, it is not uncommon for corporateprivate-business interests to harmonize with what could be called collective interests. However, the experts, perhaps naively, declared that they looked favorably on the technical-scientific partnership between the scientific body and the company, or that they believed in the ethical association between private enterprise and medical entities or even that the medical societies function as an advisory body for improving the products. But if these associations are so legitimate, why justify them? Moreover, do these companies really need scientific bodies to help them improve their products? Or do they need them to certify them for the public? There are even those who defend companies producing foodstuffs with high glycemic content: [...] both (the Brazilian Association of Nutrology and Coca-Cola®) aim to spread the scientific reality and demystify rumors that are often more powerful than scientific evidence or We are very happy, in the name of the ABESO, for the initiative of a company that has offered an increasing variety of low calorie drinks to those on diets, facilitating lifestyle changes. To what extent is the high glycemic content of soft drinks a myth? Since when has consuming Coca-Cola® products facilitated lifestyle changes if the majority are not nutritious and have high sugar and sodium content, etc.? Finally, announcing that the scientific community is very encouraged and recognizes the importance of a prize such as this that values the researchers is attempting to establish that the decision to associate the entity with the companies was not individual, but collective.

Surveying associations and discourses justifying them could be seen as showing that the scientific organizations are not embarrassed to continue establishing links with companies that produce foodstuffs contributing to increasing the exact issue that the former are combatting, namely, obesity, and it is a serious conflict of interest. Metaphorically, the scientific organizations are limping between two conflicting, and therefore irreconcilable masters. Although legal (from a juridical point of view), it seems to us that choosing such partners is nor consistent with the health message that a professional-scientific institution should pass to

its followers. Moreover, they run the risk of such partnerships beginning to influence the institute's scientific discoveries or decisions. It does not seem to be a coincidence that the results of countless studies have proven to be favorable to the interests of those financing them (Bekelman et al., 2003; Kjaergard and Als-Neilsen, 2002).

In the contradiction between the two masters (the struggle against obesity, for health, and sponsorship, with the inconsistent and undue association with brands and health promotion), certain scientific bodies are involved in a "contradiction". that is, they emit statements clearly aiming to be true, the propositional contents of which is that such foodstuffs and drinks encourage obesity and are harmful to health; but they also say, albeit implicitly, that the companies producing them are their partners. To sum up, the propositional content of the statements "eating/drinking 'x' makes you fat and is bad for your health" and "don't eat 'x' to be healthy" are in contrast to the message transmitted through the sponsors' communicative content, nullifying the validity of discourses and practices of the entities' advocating combat of the evils of obesity.

While they struggle against the obese and obesity, blaming individuals for the effects stemming from their "autonomously acquired" habits, the scientific bodies support the companies that produce and commercialize what are deemed to be some of today's most serious and ingrained health villains.

Susman (2009), commenting ironically on the defense of the association between the American Academy of Family Physicians and Coca-Cola® (Heim, 2010), called for something to justify the agreement between them. For the author, such an agreement is similar to that of a tobacco company helping to stop smoking; a company producing alcoholic drinks financing the fight against alcoholism; or even a company producing firearms curbing violence through using its products. In face of what has been shown here, it could be concluded that there are inconsistencies between the discourse of the institutions trying to promote so-called healthy habits and actions that effectively build their everyday relationships with some sponsors. Moreover, the opportunity for the above mentioned medicalscientific institutions to exercise influence over the population and to be role models for health care professionals reveals the clear conflicts of interest involved in the relationships shown here. Assuming that obesity poses health risks, such conflicts could signify their escalation, exposing human life to harm that could have been avoided by the institutions in question.

Authors' contribution

Palma, Vilaça and Assis participated in conceiving and designing the study; collecting, analyzing and interpreting data; writing; revising and approving the version to be published. Ferreira participated in analyzing and interpreting the data and revising and approving the version to be published.

References

ALPERT, J. S. "So, doctor, what's so bad about being fat?": combating the obesity epidemic in the United States. *The American Journal of Medicine*, New York, v. 123, n. 1, p. 1-2, 2010.

AMERICAN COLLEGE OF SPORTS MEDICINE.

Appropriate physical activity intervention strategies for weight loss and prevention of weight regain for adults: position stand. *Medicine & Science in Sports & Exercise*, Hagerstown, v. 41, n. 2, p. 459-471, 2009.

BEKELMAN, J. E.; MPHIL, Y. L.; GROSS, C. P. Scope and impact of financial conflicts of interest in biomedical research: a systematic review. *The Journal of the American Medical Association*, Chicago, v. 289, n. 4, p. 454-465, 2003.

BRASIL. Ministério da Saúde. Secretaria de Vigilância em Saúde. Secretaria de Gestão Estratégica e Participativa. *Vigitel Brasil 2007:* vigilância de fatores de risco e proteção para doenças crônicas por inquérito telefônico. Brasília, DF, 2008.

BRASIL. Ministério da Saúde. Secretaria de Vigilância em Saúde. Secretaria de Gestão Estratégica e Participativa. *Vigitel Brasil 2011*: vigilância de fatores de risco e proteção para doenças crônicas por inquérito telefônico. Brasília, DF, 2012.

CAMPOS, P. et al. The epidemiology of overweight and obesity: public health crisis or moral panic? *International Journal of Epidemiology*, London, v. 35, n. 1, p. 55-60, 2006.

DENNEY-WILSON, E. et al. Influences on consumption of soft drinks and fast foods in adolescents. *Asia Pacific Journal of Clinical Nutrition*, Melbourne, v. 18, n. 3, p. 447-452, 2009.

FERREIRA, N. T. *Cidadania*: uma questão para a educação. Rio de Janeiro: Nova Fronteira, 1993.

FINKELSTEIN, E. A.; STROMBOTNE, K. L. The economics of obesity. *The American Journal of Clinical Nutrition*, Bethesda, v. 91, n. 5, p. 1520S-1524S, 2010.

FLEGAL, K. M. et al. Prevalence of obesity and trends in the distribution of body mass index among US adults, 1999-2010. *Journal of the American Medical Association*, Chicago, v. 307, n. 5, p. 491-497, 2012.

FLORINDO, A. A. et al. Prática de atividades físicas e fatores associados em adultos, Brasil, 2006. *Revista de Saúde Pública*, São Paulo, v. 43, p. 65-73, nov. 2009. Suplemento 2.

GARD, M.; WRIGHT, J. *The obesity epidemic*: science, morality and ideology. London: Routledge, 2005.

GIGANTE, D. P.; MOURA, E. C.; SARDINHA, L. M. V. Prevalência de excesso de peso e obesidade e fatores associados, Brasil, 2006. *Revista de Saúde Pública*, São Paulo, v. 43, p. 83-89, nov. 2009. Suplemento 2.

GOETHE, J. W. Fausto. [S.l.]: eBooksBrasil, 2003. Disponível em: http://www.dominiopublico.gov.br/download/texto/ebooo011.pdf>. Acesso em: 2 fev. 2013.

GÓMEZ, L. et al. Patrocinio de programas de actividad física por parte de la industria de bebidas azucaradas: ¿salud pública o relaciones públicas? *Revista de Saúde Pública*, São Paulo, v. 45, n. 2, p. 423-427, abr. 2011.

HEIM, L. Identifying and addressing potential conflict of interest: a professional medical organization's code of ethics. *Annals of Family Medicine*, Leawood, v. 8, n. 4, p. 359-361, 2010.

HILTON, S.; PATTERSON, C.; TEYHAN, A. Escalating coverage of obesity in UK newspapers: the evolution and framing of the "Obesity Epidemic" from 1996 to 2010. *Obesity*, Silver Spring, v. 20, n. 8, p. 1688-1695, 2012.

HOBBES, T. *Thomas Hobbes*. São Paulo: Abril Cultural, 1983. (Coleção Os Pensadores.)

JAIN, A. Fighting obesity. *British Medical Journal*, London, v. 328, n. 7452, p. 1327-8, June. 2004.

JENSEN, B. W. et al. Consumption patterns of sweet drinks in a population of Australian children and adolescents (2003-2008). *BMC Public Health*, London, v. 12, n. 1, p. 771, 2012.

KJAERGARD, L. L.; ALS-NEILSEN, B. Association between competing interests and authors' conclusions: epidemiological study of randomised clinical trials published in the *British Medical Journal*, London, v. 325, n. 7358, p. 249, 2002.

ORLANDI, E. P. *Interpretação*: autoria, leitura e efeitos do trabalho simbólico. Petrópolis: Vozes, 1996.

PALMA, A.; VILAÇA, M. M. O sedentarismo da epidemiologia. *Revista Brasileira de Ciências do Esporte*, Campinas, v. 31, n. 2, p. 105-119, 2010.

PALMA, A. et al. Os "pesos" de ser obeso: traços fascistas no ideário de saúde contemporâneo. *Movimento*, Porto Alegre, v. 18, n. 4, p. 99-119, 2012.

PARADIS, G. Have we lost the war on obesity? *Canadian Journal of Public Health*, Ottawa, v. 103, n. 3, p. 163, 2012.

PUHL, R.; PETERSON, J. L.; LUEDICKE, J. Fighting obesity or obese persons?: public perceptions of obesity-related health messages. *International Journal of Obesity*, London, v. 37, n. 6, p. 774-782, 2013.

RAIL, G.; HOLMES, D.; MURRAY, S. J. The politics of evidence on 'domestic terrorists': obesity discourses and their effects. *Social Theory & Health*, Basingstoke, v. 8, n. 3, p. 259-279, 2010.

SERRA, G. M. A.; SANTOS, E. M. Saúde e mídia na construção da obesidade e do corpo perfeito. *Ciência & Saúde Coletiva*, Rio de Janeiro, v. 8, n. 3, p. 691-701, 2003.

SUSMAN, J. Do things really go better with Coke? *The Journal of Family Practice*, Parsippany, v. 58, n. 12, p. 630, 2009.

VARO, J. J. et al. Distribution and determinants of sedentary lifestyles in the European Union. *International Journal of Epidemiology*, London, v. 32, n. 1, p. 138-146, 2003.

VARTANIAN, L. R.; SCHWARTZ, M. B.; BROWNELL, K. D. Effects of soft drink consumption on nutrition and health: a systematic review and meta-analysis. *American Journal of Public Health*, New York, v. 97, n. 4, p. 667-675, 2007.

Received: 06/05/2013 Resubmitted: 03/14/2014 Approved: 03/17/2014