

## A CANADIAN HEALTH CARE AND SCIENTIFIC ORGANIZATION POLICY CONSENSUS STATEMENT

### Restricting Marketing of Unhealthy Foods and Beverages to Children and Youth in Canada

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#### POLICY GOAL

Federal government to immediately begin a legislative process to restrict all marketing targeted to children under the age of 13 of foods and beverages high in saturated fats, trans-fatty acids, free sugars or sodium and that in the interim the food industry immediately ceases marketing of such food to children.

#### PURPOSE OF STATEMENT

This policy consensus statement was developed to reflect the growing body of evidence linking the promotion and consumption of diets high in saturated fats, trans-fatty acids, free sugars or sodium<sup>1</sup> to cardiovascular and chronic disease (hypertension, dyslipidemia, diabetes mellitus, obesity, cancer, and heart disease and stroke)—leading preventable risk factors and causes of death and disability within Canada and worldwide. (1-3)

The current generation of Canadian children is expected to live shorter, less healthy lives as a result of unhealthy eating. (4) Canadians' overconsumption of fat, sodium and sugar, rising rates of childhood obesity, growing numbers of people with cancer, heart disease and stroke, and the combined strain they exert on the health care system and quality of life for Canadians necessitates immediate action for Canadian governments and policy-makers. Restricting the marketing of unhealthy foods and beverages directed at children

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<sup>1</sup> For the remainder of the document, reference to foods and beverages high in saturated fats, trans-fatty acids, free sugars or sodium will be framed as foods/beverages high in fats, sugars or sodium.

is gaining increasing international attention as a cost-effective, population-based intervention to reduce the prevalence and the burden of chronic and cardiovascular diseases through reducing children's exposure to, and consumption of, disease-causing foods and beverages. (2,5,6)

In May 2010, the World Health Organization (WHO) released a set of recommendations on the marketing of foods and non-alcoholic beverages to children (5) and called on governments worldwide to reduce the *exposure* of children to advertising messages that promote foods and beverages high in saturated fats, trans-fatty acids, free sugars or sodium and to reduce the use of *powerful marketing techniques*. In June 2012, the follow-up document, *A Framework for Implementing the Set of Recommendations on the Marketing of Foods and Non-Alcoholic Beverages to Children*, (7) was released.

The policy aim should be to reduce the impact on children of marketing of foods high in saturated fats, trans-fatty acids, free sugars, or sodium.

WHO (2010): Recommendation 1

What this policy consensus statement offers is the perspective of many major national health care professional and scientific organizations to guide Canadian governments and non-government organizations on actions that need to be taken to protect the health of our future generations, in part by restricting the adverse influence of marketing of foods & beverages high in fat, sugar or sodium to Canadian children and youth.

#### SUMMARY OF EVIDENCE AND RATIONALE

- Young children lack the cognitive ability to understand the persuasive intent of marketing

or assess commercial claims critically. (8) in 1989 the Supreme Court of Canada ruled that “advertisers should not be able to capitalize upon children’s credulity” and “advertising directed at young children is per se manipulative”.(5)

- The marketing and advertising of information or products known to be injurious to children’s health and wellbeing is unethical and infringes on the UN Convention on the Rights of the Child which stipulates that, “In all actions concerning children ... the best interests of the child shall be a primary consideration.” (9)
- Unhealthy food advertising during children’s television programs in Canada is higher than in many countries, with children being exposed to advertisements for unhealthy foods and beverages up to 6 times per hour. (10)
- Unhealthy food and beverage advertising influences children’s food preferences, purchase requests and consumption patterns and has been shown to be a probable cause of childhood overweight and obesity by the WHO. (1,8,11)
- The vast majority of Canadians (82%) want government intervention to place limits on advertising unhealthy foods and beverages to children. (12)
- The regulation of food and beverage marketing to children is an effective and cost-saving population-based intervention to improve health and prevent disease. (13,14)
- Several bills have been introduced into the House of Commons to amend the *Competition Act* and the *Food and Drug Act* to restrict commercial advertising, including food, to children under 13 years of age. None have yet been passed. (15)
- Canada’s current approach to restricting advertising to children is not effective and is not in line with the 2010 WHO recommendations on

the marketing of foods and beverages to children, nor is it keeping pace with the direction of policies being adopted internationally, which ban or restrict unhealthy food and beverage marketing targeted to children. (16,17)

#### LEGISLATIVE RULING

The Supreme Court of Canada concluded that “advertising directed at young children is per se manipulative”

Irwin Toy Ltd. v. Québec (AG), 1989

#### FOOD & BEVERAGE MARKETING TO CHILDREN: A TIMELY OPPORTUNITY FOR CANADA

Childhood obesity and chronic disease prevention are collective priorities for action of federal, provincial and territorial (F/P/T) governments. (3,5,18,19)

Strategy 2.3b of the 2011 *Federal, Provincial and Territorial Framework for Action to Promote Healthy Weights* stipulates “looking at ways to decrease the marketing of foods and beverages high in fat, sugar and/or sodium to children.” (5, p. 31)

The 2010 Sodium Reduction Strategy for Canada has also identified the need to “continue to explore options to reduce the exposure of children to marketing for foods that are high in sodium” as a key activity for F/P/T governments to consider. (19, p. 31)

In their 2010 set of recommendations, the WHO stipulated that governments are best positioned to lead and ensure effective policy development, implementation and evaluation. (6)

To date, there has been no substantive movement by the federal government to develop coordinated national-level policies that change the way unhealthy foods and beverages are produced, marketed and sold. Current federal, provincial and industry-led self-regulatory codes are inconsistent in their scope and remain ineffective in their ability to sufficiently reduce children’s exposure to

unhealthy food and beverage marketing, nor have they been adequately updated to address the influx of new marketing mediums to which children and youth in Canada are increasingly subjected.

Quebec implemented regulations in 1980 restricting all commercial advertising. (20) Although the ban has received international recognition and is viewed as world leading, several limitations remain, namely exposure of Quebec children to marketing from outside Quebec, weak enforcement of the regulations and narrow application of its provisions.

Accordingly, the undersigned are calling on the federal government to provide strong leadership and **establish a legislative process for the development of regulations that restrict all commercial marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or sodium to children.**

Strong federal government action and commitment are required to change the trajectory of chronic diseases in Canada and institute lasting changes in public health. Specifically:

*Efforts must be made to ensure that children...are protected against the impact of marketing [of foods with a high content of fat, sugar and sodium] and given the opportunity to grow and develop in an enabling food environment — one that fosters and encourages healthy dietary choices and promotes the maintenance of healthy weight. (7, p. 6)*

Such efforts to protect the health of children must go beyond the realm of federal responsibility and involve engagement, dialogue, leadership and advocacy by all relevant stakeholders, including all elected officials, the food and marketing sector, public health, health care professional and scientific organizations, and most importantly civil society.

The undersigned support the development of policies that are regulatory in nature to create national and/or regional uniformity in implementation and compliance by industry.

“Realizing the responsibility of governments both to protect the health of children and to set definitions in policy according to public health goals and challenges — as well as to ensure policy is legally enforced — statutory regulation has the greatest potential to achieve the intended or desired policy impact.”

WHO (2012), p. 33

## **POLICY/LEGISLATIVE SPECIFICATIONS**

The following outline key definitions and components of an effective and comprehensive policy on unhealthy food and beverage marketing to children and should be used to guide national policy scope and impact.

- **Age of Child:** In the context of broadcast regulations, the definition of “age of child” typically ranges from under 13 years to under 16 years. In Canada, Quebec’s *Consumer Protection Act* (20) applies to children under 13 years of age. Consistent with existing legislation, this report recommends that policies restricting marketing of unhealthy foods and beverages be directed to children less than 13 years of age at a minimum.

While the science on the impact of marketing on children over 13 is less extensive, emerging research reveals that older children still require protection and may be more vulnerable to newer forms of marketing (i.e., digital media), in which food and beverage companies are playing an increasingly prominent role. (21-23) Strong consideration should be given to extending the age of restricting the marketing of unhealthy food and beverage to age 16.

- **Unhealthy Food and Beverages:** In the absence of a national standardized definition for “healthy” or “unhealthy” foods, this document defines unhealthy foods broadly as foods and beverages with a high content of saturated fats, trans-fatty acids, free sugars or sodium, as per the WHO recommendations. (5) It is recommended that a robust and comprehensive definition be

developed by an interdisciplinary stakeholder working group.

- **Focus on Marketing:** Marketing is more than advertising and involves:

*...any form of commercial communication or message that is designed to, or has the effect of, increasing the recognition, appeal and/or consumption of particular products and services. It comprises anything that acts to advertise or otherwise promote a product or service. (6, p. 9)*

This definition goes beyond the current legal definition of advertisement outlined in the *Food and Drug Act* as “any representation by any means whatever for the purpose of promoting directly or indirectly the sale or disposal of any food, drug, cosmetic or device.” (24)

- **Marketing Techniques, Communication Channels and Locations:** Legislation restricting unhealthy food and beverage marketing needs to be sufficiently comprehensive to address the broad scope of marketing and advertising techniques that have a particularly powerful effect on children and youth. This includes, but is not limited to, the following:

- \* Television
- \* Internet
- \* Radio
- \* Magazines
- \* Direct electronic marketing (email, SMS)
- \* Mobile phones
- \* Video and adver-games
- \* Characters, brand mascots and/or celebrities, including those that are advertiser-generated
- \* Product placement
- \* Cross-promotions
- \* Point-of-purchase displays
- \* Cinemas and theatres
- \* Competitions and premiums (free toys)
- \* Children’s institutions, services, events and activities (schools, event sponsorship)
- \* “Viral and buzz marketing” (25,26)

- **Directed to Children:** The criteria used by the Quebec *Consumer Protection Act* (20) to determine whether an advertisement is “directed at children” offers a starting point in developing national legislation regarding child-directed media. The loopholes in the Quebec *Consumer Protection Act* criteria, namely allowing advertising of unhealthy foods and beverages directed at adults during children’s programming, will necessitate the development of an alternative approach or set of criteria that reflects the range of media to which children are exposed and when they are exposed, in addition to the proportion of the audience that is made up of children.

#### Quebec Consumer Protection Act Article 249

To determine whether or not an advertisement is directed at persons under thirteen years of age, account must be taken of the context of its presentation, and in particular of:

- a) the nature and intended purpose of the goods advertised;
- b) the manner of presenting such advertisement;
- c) the time and place it is shown.

## ACTION RECOMMENDATIONS

### 1. Federal Government Leadership

- 1.1 Immediately and publicly operationalize the WHO set of recommendations on the marketing of foods and non-alcoholic beverages to children.

In working toward the implementation of the WHO recommendations, the federal government is strongly urged to accelerate implementation of the WHO *Framework for Implementing the Set of Recommendations on the Marketing of Foods and Beverages to Children*. To this end, the Government of Canada is urged to:

**1.2** Convene a Federal, Provincial and Territorial Working Group on Food and Beverage Marketing to Children to develop, implement and monitor policies to restrict unhealthy food and beverage marketing to children. As stipulated within the WHO Implementation Framework:

*The government-led working group should ultimately reach consensus on the priorities for intervention, identify the available policy measures and decide how they best can be implemented. (7, p.13)*

**1.3** In developing policies, it is recommended that the working group:

- Develop standardized criteria and an operational definition to distinguish and classify “unhealthy” foods and beverages. Definitions should be developed using objective, evidence-based methods and should be developed and approved independent of commercial interests.
- Develop a set of definitions/specifications that will guide policy scope and implementation. Consistent with the WHO recommendations, the working group is encouraged to apply the policy specifications identified above.
- Set measurable outcomes, targets and timelines for achievement of targets for industry and broadcasters to restrict unhealthy food and beverage marketing to children in all forms and settings. It is recommended that policies be implemented as soon as possible and within a 3-year time frame.
- Establish mechanisms for close monitoring and enforcement through defined rewards and/or penalties by an independent regulatory agency that has the power and infrastructure to evaluate questionable advertisements and enforce penalties for non-compliance.<sup>2</sup> The nature and extent of

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<sup>2</sup> Such an infrastructure could be supported through the Canadian Radio-television and Telecommunications Commission (CRTC), similar to

penalties imposed should be sufficiently stringent to deter violations. Enforcement mechanisms should be explicit, and infringing companies should be exposed publicly.

- Develop evaluation mechanisms to assess process, impact and outcomes of food and beverage marketing restriction policies. Components should include scheduled reviews (5 years or as agreed upon) to update policies and/or strategies. To showcase accountability, evaluation findings should be publicly disseminated.

**1.4** Provide adequate funding to support the successful implementation and monitoring of food and beverage marketing restriction policies.

**1.5** Collaborate with the Canadian Institutes of Health Research and other granting councils to fund research to generate baseline data and address gaps related to the impact of marketing in all media on children and how to most effectively restrict advertising unhealthy foods and beverages to children. (27)

**1.6** Fund and commission a Canadian economic modeling study to assess the cost-effectiveness and the relative strength of the effect of marketing in comparison to other influences on children’s diets and diet-related health outcomes. Similar studies have been undertaken elsewhere and highlight cost-benefit savings from restricting unhealthy food marketing. (13,14)

**1.7** Call on industry to immediately stop marketing foods and beverages to children that are high in fats, sugar or sodium.

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the authority of the US Federal Trade Commission (FTC), the Canadian Food Inspection Agency or the *Food and Drug Act* via the development of an advertising investigation arm.

## **2. Provincial, Territorial and Municipal Governments**

- 2.1** Wherever possible, incorporate strategies to reduce the impact of unhealthy food and beverage marketing to children into provincial and local (public) health or related strategic action plans, and consider all settings that are frequented by children.
- 2.2** Pass and/or amend policies and legislation restricting unhealthy food and beverage marketing to children that go beyond limitations stipulated in federal legislation and regulations and industry voluntary codes.
- 2.3** Until federal legislation is in place, strike a P/T Steering Committee on Unhealthy Food and Beverage Marketing to Children to establish interprovincial consistency related to key definitions and criteria and mechanisms for enforcement, as proposed above.
- 2.4** Collaborate with local health authorities, non-governmental organizations and other stakeholders to develop and implement education and awareness programs on the harmful impacts of marketing, including but not limited to unhealthy food and beverage advertising.
- 2.5** Call on industry to immediately stop marketing foods and beverages to children that are high in fats, sugar or sodium.

## **3. Non-governmental Organizations (NGOs), Health Care Organizations, Health Care Professionals**

- 3.1** Publicly endorse this position statement and advocate to all Canadian governments to restrict marketing of unhealthy foods and beverages to children and youth in Canada.
- 3.2** Collaborate with governments at all levels to facilitate implementation and enforcement of federal/provincial/municipal regulations or policies.

**3.3** Wherever possible, incorporate and address the need for restrictions on unhealthy food and beverage marketing to children into position papers, strategic plans, conferences, programs and other communication mediums.

**3.4** Support, fund and/or commission research to address identified research gaps, including the changing contexts and modes of marketing and their implications on the nutritional status, health and well-being of children and youth

**3.5** Call on industry to immediately stop the marketing of foods and beverages high in fat, sugar or sodium.

## **4. Marketing and Commercial Industry**

**4.1** Immediately cease the marketing of foods and beverages high in fats, sugar or sodium.

**4.2** Amend the Canadian Children’s Food and Beverage Advertising Initiative (CAI) nutrition criteria used to re-define “better-for-you products” to be consistent with currently available international standards that are healthier and with Canadian nutrient profiling standards, once developed.

## **BACKGROUND AND EVIDENCE BASE**

Non-communicable diseases (diabetes, stroke, heart attack, cancer, chronic respiratory disease) are a leading cause of death worldwide and are linked by several common risk factors including high blood pressure, high blood cholesterol, obesity, unhealthy diets and physical inactivity. (1,2,3 28) The WHO has predicted that premature death from chronic disease will increase by 17% over the next decade if the roots of the problem are not addressed. (2)

Diet-related chronic disease risk stems from long-term dietary patterns which start in childhood (8,28). Canadian statistics reveal children, consume too much fat, sodium and sugars (foods that cause chronic disease) and eat too little fiber, fruits and vegetables (foods that prevent chronic disease). (3)

There is evidence that (television) advertising of foods high in fat, sugar or sodium is associated with childhood overweight and obesity. (6,11) Children and youth in Canada are exposed to a barrage of marketing and promotion of unhealthy foods and beverages through a variety of channels and techniques – tactics which undermine and contradict government, health care professional and scientific recommendations for healthy eating. (10,26)

Available research indicates that food marketing to children influences their food preferences, beliefs, purchase requests and food consumption patterns. (8,29) A US study showed that children who were exposed to food and beverage advertisements consumed 45% more snacks than their unexposed counterparts. (30) Similarly, preschoolers who were exposed to commercials for vegetables (broccoli and carrots) had a significantly higher preference for these vegetables after multiple exposures (n=4) compared to the control group. (31)

Economic modeling studies have shown that restricting children’s exposure to food and beverage advertising is a cost effective population based approach to childhood obesity prevention, with the largest overall gain in disability adjusted life years. (13,14). Canada has yet to conduct a comparable analysis.

### **Marketing and Ethics**

Foods and beverages high in fats, sugars or sodium is one of many health compromising products marketed to children. It has been argued that policy approaches ought to extend beyond marketing of unhealthy foods and beverages to one that restricts marketing of all products to children, as practiced in Quebec (7,26,32). Article 36 of the *Convention on the Rights of the Child*, to which Canada is a signatory, states that, “children should be protected from any activity that takes advantage of them or could harm their welfare and development.” (9)

Restricting marketing of all products has been argued to be the most comprehensive policy option in that it aims to protect children from any

commercial interest and is grounded in the argument that children have the right to a commercial-free childhood (7, 25,26,32). The focus on restricting unhealthy food and beverage marketing was based in consultations with national health organizations whose mandates, at the time of writing, were more aligned with a focus on unhealthy foods and beverages.

### **Canada’s Food and Beverage Marketing Environment**

Television remains a primary medium for children’s exposure to advertising, with Canadian children aged 2–11 watching an average of 18 hours of television per week. (26) In the past two decades, the food and beverage marketing environment has expanded to include Internet marketing, product placement in television programs, films and DVDs, computer and video games, peer-to-peer or viral marketing, supermarket sales promotions, cross-promotions between films and television programs, use of licensed characters and spokes-characters, celebrity endorsements, advertising in children’s magazines, outdoor advertising, print marketing, sponsorship of school and sporting activities, advertising on mobile phones, and branding on toys and clothing. (25,26)

A systematic review of 41 international studies looking at the content analysis of children’s food commercials found that the majority advertised unhealthy foods, namely pre-sugared cereals, soft drinks, confectionary and savoury snacks and fast food restaurants. (33) In an analysis of food advertising on children’s television channels across 11 countries, Canada (Alberta sample) had the second-highest rate of food and beverage advertising (7 advertisements per hour), 80% of which were for unhealthy foods and beverages defined as “high in undesirable nutrients and/or energy.” (10)

Illustrating the influence of food packaging in supermarkets, two Canadian studies found that for six food product categories 75% of the products were directed solely at children through use of colour, cartoon mascots, pointed appeals to parents

and/or cross-merchandising claims, games or activities. Of the 63% of products with nutrition claims, 89% were classified as being “of poor nutritional quality” due to high levels of sugar, fat, or sodium when judged against US-based nutrition criteria. Less than 1% of food messages specifically targeted to children were for fruits and vegetables. (34,35)

Foods and beverages are also unhealthily marketed in schools. A recent study of 4,936 Canadian students from grades 7 to 10 found that 62% reported the presence of snack-vending machines in their schools, and that this presence was associated with students’ frequency of consuming vended goods. (36) In another Canadian analysis, 28% of elementary schools reported the presence of some form of advertising in the school and 19% had an exclusive marketing arrangement with Coke or Pepsi. (37) Given children’s vulnerability, a key tenant of the WHO recommendations on marketing to children is that “settings where children gather should be free from all forms of marketing of foods high in saturated fats, trans-fatty acids, and free sugars or sodium.” (6, p.9) and need to be included in development of food marketing policies directed at children.

The Canadian public wants government oversight in restricting unhealthy food marketing to children. A nation-wide survey of over 1200 Canadian adults found 82% want limits placed on unhealthy food and beverage advertising to children; 53% support restricting all marketing of high-fat, high-sugar or high-sodium foods aimed directly at children and youth. (12)

### **Canada’s Commercial Advertising Environment**

Internationally, 26 countries have made explicit statements on food marketing to children and 20 have, or are in the process of, developing policies in the form of statutory measures, official guidelines or approved forms of self-regulation. (38) The differences in the nature and degree of these restrictions is considerable, with significant variation regarding definition of child, products covered, communication and marketing strategies

permitted and expectations regarding implementation, monitoring and evaluation. (38,39) With the exception of Quebec, Canada’s advertising policy environment is restricted to self-regulated rather than legislative measures with little monitoring and oversight in terms of measuring the impact of regulations on the intensity and frequency of advertising unhealthy foods and beverages to children. (39)

### **Federal Restrictions**

Nationally, the *Food and Drug Act* and the *Competition Act* provide overarching rules on commercial advertising and (loosely) prohibit selling or advertising in a manner that is considered false, misleading or deceptive to consumers. These laws, however, contain no provisions dealing specifically with unhealthy food advertising or marketing to children and youth. (26) The *Consumer Package and Labeling Act* outlines federal requirements concerning the packaging, labeling, sale, importation and advertising of prepackaged non-food consumer products. Packaging and labels, however, are not included under the scope of advertising and therefore not subject to the administration and enforcement of the Act and regulations. (26)

Such loopholes have prompted the introduction of three private member's bills into the House of Commons to amend both the *Competition Act* and the *Food and Drugs Act*. Tabled in 2007, 2009 and 2012, respectively, none of the bills have, to date, advanced past the First Reading. (15)

### **Industry Restrictions**

The *Canadian Code of Advertising Standards* (Code) and the *Broadcast Code for Advertising to Children* (BCAC) together cover Canadian broadcast and non-broadcast advertising. (23) While both have explicit provisions/clauses to cover advertising directed to children (12 years and younger), neither address or explicitly cover unhealthy food and beverage advertising. Further excluded are other heavily used and persuasive forms of marketing directed to children, including in-store promotions, packaging,



logos, and advertising in schools or at events, as well as foreign media. (40)

Formed in 2008, the Canadian Children's Food and Beverage Advertising Initiative (CAI) defines marketing standards and criteria to identify the products that are appropriate or not to advertise to children under 12 years old. Under this initiative, participating food companies (N=19) are encouraged to direct 100% of their advertising to children under 12 to "better-for-you" products. (41) In 2010, the scope of CAI was expanded to include other media forms, namely video games, child-directed DVDs and mobile media.

Despite reportedly high compliance by CAI participants, (41) several fundamental loopholes undermine its level of protection and effectiveness, namely:

- Participation is voluntary, exempting non-participants such as President's Choice, Wendy's and A&W, from committing to CAI core principles.
- Companies are allowed to create their own nutrient criteria for defining "better-for-you" or "healthier dietary choice" products. (32) A 2010 analysis revealed that up to 62% of these products would not be acceptable to promote to children by other countries' advertising nutrition standards. (16)
- Companies are able to adopt their own definition of what constitutes "directed at children" under 12 years. (32) Participants' definitions of child audience composition percentage range from 25% to 50%, significantly more lenient than current Quebec legislation and other international regulatory systems. (7,42,43)
- The initiative excludes a number of marketing and advertising techniques primarily directed at children, namely advertiser-generated characters (e.g., Tony the Tiger), product packaging, displays of food and beverage products, fundraising, public service messaging and educational programs. (26,27)

### **Provincial Restrictions**

The Quebec *Consumer Protection Act* states that "no person may make use of commercial advertising directed at persons under thirteen years of age." (26) Despite its merits, the effectiveness of the Quebec ban has been compromised. In its current form, the ban does not protect children from cross-border leakage of child-directed advertisements from other provinces. (40) One study found that while the ban reduced fast food consumption by US\$88 million per year and decreased purchase propensity by 13% per week, the outcomes primarily affected French-speaking households with children, not their English-speaking counterparts. (44) A more recent study looking at the ban's impact on television advertising arrived at similar conclusions and found that Quebec French subjects were exposed to significantly fewer candy and snack promotions (25.4%,  $p < 0.001$ ) compared to the Ontario English (33.7%) and Quebec English (39.8%) groups. (40)

The ban has further been criticized for having a weak definition of "advertisement", which allows adult-targeted advertisements for unhealthy food and beverages during children's programming (37) and having weak regulatory and monitoring structures. (37,40)

In assessing the effectiveness of Quebec's legislation in reducing children's exposure to unhealthy food advertising, it is important to note that the ban was not developed to target or reduce the marketing of foods and beverages specifically, but rather to reduce the commercialization of childhood. (27)

### **Public Policy: The Way Forward**

Several legislative approaches have been undertaken internationally to restrict unhealthy food and beverage marketing. (7,43,45) While more research is needed with regards to the impact of restricting unhealthy food and beverage marketing on child health outcomes (i.e., obesity), a US study estimated that between 14-33% of instances of childhood obesity could be prevented by eliminating television advertising for unhealthy

food. (46) An Australian study found that a restriction on non-core-food advertisement between 7am and 8:30pm could reduce children's exposure to unhealthy food advertising by almost 80%. (47) An evaluation of the UK regulations which restricts television advertising of all foods high in fat, sugar and sodium found that since its introduction there has been a 37% reduction in unhealthy food advertisement seen by children. (25)

Restrictions on food and beverage marketing are being increasingly advocated internationally. A 2011 International Policy Consensus Conference identified regulating marketing to children as a key policy strategy to prevent childhood obesity. (48) A similar recommendation was made at the September 2011 United Nations high-level meeting on the prevention and control of non-communicable diseases. Restrictions on television advertising for less healthful foods has also been identified as an effective (Class I; Grade B) population-based strategy to improve dietary behaviors in children by the American Heart Association. (49)

Within Canada, non-governmental and other health organizations are assuming an equally active role. Among others, the Chronic Disease Prevention Alliance of Canada, the Dietitians of Canada, the Alberta Policy Coalition for Chronic Disease Prevention, the Simcoe Board of Health, the Thunder Bay and District Board of Health and the Kingston, Frontenac, Lennox and Addington Board of Health have issued position papers or statements urging the federal government to implement more stringent regulations on food and beverage marketing to children. (26,42,48)

### **Conclusions**

The current voluntary, industry self-regulated and ineffective system of restricting the marketing and advertising of foods and beverages fails to protect Canadian Children and thereby contributes to the rising rates of childhood obesity and the likelihood of premature death and disability in our children's and future generations. Strong federal government

leadership and nationwide action from other levels of government and other key stakeholders are needed. Regulation restricting unhealthy food and beverage advertising is internationally supported, with a growing evidence base for expanding such regulation to all forms of food marketing.

This policy statement offer an integrated, pragmatic and timely response to the national stated priorities of childhood obesity and chronic disease prevention in Canada and supports the F/P/T vision of making Canada, "...a country that creates and maintains the conditions for healthy weights so that children can have the healthiest possible lives." (4)

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