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# Improving Canada's Eating Environment

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

Consensus Recommendations of Canadian  
Health and Scientific Organizations

### **Executive Summary**



# Statement of Support and Endorsement

The following health care professional, health and scientific organizations, endorse this policy statement.

## National

- HSFC CIHR Chair in Hypertension Prevention and Control
- Canadian Association of Cardiac Rehabilitation
- Canadian Association of Pediatric Nephrologists
- Canadian Cardiovascular Society
- Canadian Council of Cardiovascular Nurses
- Canadian Dental Association
- Canadian Diabetes Association
- Canadian Medical Association
- Canadian Nurses Association
- Canadian Pediatric Society
- Canadian Public Health Association
- Canadian Society of Internal Medicine
- Canadian Society of Nephrology
- Canadian Society of Pharmacology and Therapeutics
- Canadian Stroke Network
- Childhood Obesity Foundation
- Chronic Disease Prevention Alliance of Canada
- College of Family Physicians of Canada
- The Kidney Foundation of Canada
- Heart and Stroke Foundation of Canada
- Hypertension Canada
- Public Health Physicians of Canada
- Helene Delisle, Department of Nutrition, University of Montreal

## Provincial

- Alberta Policy Coalition for Chronic Disease Prevention
- Alberta Public Health Association
- Quebec Coalition on Weight-Related Problems

All listed organizations have given permission to use their logo and name. Individual endorsements reflect individual support and do not imply endorsement by any organization with which they are affiliated.

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## Purpose

This statement supports the advancement of the *Pan-Canadian Framework for Healthy Blood Pressure*<sup>1</sup> which advocates for the implementation of healthy dietary policies as part of a set of key recommendations to improve health and prevent diet-related chronic disease, including hypertension.

Led by the Heart and Stroke Foundation of Canada, Canadian Institute for Health Research (HSFC-CIHR) Chair in Hypertension Prevention and Control, the writing of this statement was supported by the these members of the Canadian Hypertension Advisory Committee:

- Norm Campbell, MD, CIHR/HSFC Chair in Hypertension Prevention and Control
- Manuel Arango, Director of Health Policy, Heart and Stroke Foundation
- Tara Duhaney, Policy Director, Canadian Hypertension Advisory Committee
- Judi Farrell, CEO, Hypertension Canada
- Mark Gelfer, MD, Family Physician
- Dorothy Morris R.N., Educator, Vancouver Island Health Authority
- Rosana Pellizzari, Medical Officer of Health, Peterborough County-City Health Unit
- Jill Skinner, Associate Director, Public Health, Canadian Medical Association
- Ross Tsuyuki, University of Alberta
- Kevin Willis, Ph.D., Executive Director, Canadian Stroke Network

**\*\* Membership on the Hypertension Advisory Committee does not imply member organizational endorsement or approval of this statement**

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<sup>1</sup>[http://www.hypertensiontalk.com/canadian\\_hypertension\\_framework/](http://www.hypertensiontalk.com/canadian_hypertension_framework/)

# Background

The strength of association between unhealthy food and beverage marketing and children food preferences, purchase requests and consumption patterns is strong. Unhealthy diets, broadly defined as those high in saturated and trans fats, added sugar or sodium and low in fresh fruit and vegetables<sup>2</sup>, substantially increase the risk for cardiovascular and chronic diseases (1).

With nearly 1 in 4 Canadian children overweight and two-thirds of total deaths attributable to chronic disease, childhood obesity and chronic disease prevention are stated public health goals for Canada (2). Policy initiatives to regulate food marketing to children are among the most effective and cost-saving to improve diet and prevent chronic disease (3).

Canadian children are exposed to television advertisement for unhealthy foods, or food combinations, up to 6 times per hour, higher than in many other countries (4). Young children are cognitively susceptible to the persuasive intent of advertising and therefore require protection. Restrictions on reducing the exposure of children to marketing of unhealthy foods and beverages have gained global attention with the World Health Organization and the United Nations encouraging governments to reduce the exposure of children to advertising messages that promote unhealthy foods (5,6).

Since 1980, the Quebec *Consumer Protection Act*, bans all advertising directed at children under the age of 13 years. While world-renowned, the ban has been faulted for not protect Quebec children to marketing from outside Quebec, weak enforcement of the regulations and narrow application of its provisions (7).

There has been little movement from the federal

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<sup>2</sup> Foods and beverages high in saturated fats, trans-fatty acids, free sugars or sodium will be referred to as foods/beverages high in fats, sugars or sodium.

government to impose regulations on unhealthy food and beverage advertising to children. Current industry lead self-regulatory codes are inconsistent in their scope and remain ineffective in their ability to sufficiently reduce children's exposure to unhealthy food marketing (7,8).

In response, a *Canadian Health and Scientific Organization Policy Consensus Statement on Restricting Marketing of Unhealthy Foods and Beverages to Children and Youth in Canada* was developed. Initiated by the Canada Chair in Hypertension Prevention and Control and prepared in close consultation with leading national health organizations, this statement identifies key recommendations for federal, provincial and territorial governments, non-governmental organizations, industry and other stakeholders to both advocate for and implement.

## 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.

## Key Recommendations

**The Federal Government is called upon to:**

1. Operationalize the WHO *Set of Recommendations on the Marketing of Foods and Non-Alcoholic Beverages to Children*.
2. Convene a Federal, Provincial and Territorial (FPT) Working Group to:
  - Develop, implement and monitor policies that restricts unhealthy food and beverage marketing to children;
  - Develop standardized criteria and an operational definition to distinguish and classify 'healthy' and 'unhealthy food';

- Develop a set of definitions which outlines policy scope and implementation regarding: age of child, marketing techniques and communication channels, what constitutes 'directed at children' and restricted foods;
  - Set measurable outcomes, targets and timelines for food marketing restrictions. Policies should be implemented within a 3-year time frame;
  - Establish mechanisms for close monitoring and enforcement of policies. Enforcement mechanisms should be sufficiently stringent to defer violations. Violations should be publicly accessible;
  - Develop evaluation mechanisms to assess impact of policies. Scheduled reviews should occur every 5 years or as agreed upon.
3. Provide adequate funding to support the successful implementation and monitoring of restrictions on unhealthy food and beverage marketing.
  4. Fund and commission a Canadian economic modeling study to assess the cost-effectiveness of marketing restrictions relative to other chronic disease interventions.

**Provincial, Territorial and Municipal Governments are called upon to:**

1. Pass and/or amend policies and legislation restricting unhealthy food and beverage marketing to children that go beyond limitations stipulated in current federal and voluntary codes.
2. (Until federal legislation is in place) Strike a P/T Steering Committee to establish inter-provincial consistency regarding key policy definitions and criteria.
3. Collaborate with local health authorities, non-governmental organizations and other stakeholders to implement public education initiatives on the harmful impacts of marketing, including but not limited to food and beverage advertising.

**Nongovernmental and healthcare organizations and health care professions are called upon to:**

1. Endorse this policy statement and advocate to governments at all levels to pass legislation

restricting marketing of unhealthy foods and beverages to children

2. Collaborate with governments at all levels to facilitate implementation and enforcement of federal, provincial and/or municipal regulations and policies
3. Incorporate and promote the need for restrictions on unhealthy food and beverage marketing into position papers, strategic plans, conferences, programs and other communication mediums.

**All government and non-governmental stakeholders are called upon to:**

1. Call on industry to immediately stop marketing foods to children that are high in fats, sugar and/or sodium
2. Include strategies to restrict unhealthy food marketing as components in future health and/or strategic plans or agreements, and consider all settings that are frequented by children
3. Support, fund and/or commission research to address identified research gaps including the changing contexts and modes of marketing and its implication on the health and well-being of children and youth

**Marketing and Commercial Industries are called upon to:**

1. Immediate cease marketing of foods and beverages high in fats, sugars and/or sodium
2. Amend the Canadian Children's Food and Beverage Advertising Initiative (CAI) nutrition criteria to be consistent with currently available international standards that are healthier and/or with Canadian nutrient profiling standards, once developed.

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