

# Review of Selected Position Statements on Children's Marketing/ Advertising

## June 2014

### **Background**

In light of the rising prevalence of childhood obesity and other indicators of poor diet, many public health and child advocates in Canada have raised concerns about the negative impact of commercial marketing on children's health. Several have published policy or position statements that recommend changes to the children's marketing environment to address these concerns. The table below summarizes ten positions by selected local, provincial and national organizations on the issue of children's marketing/ advertising in Canada. The summary is not intended as a comprehensive review of all known policy statements but an analysis of a small number, in particular those based on a review of evidence. The table identifies each organization's key recommendation(s), regulatory approach, scope of position (marketing or advertising of unhealthy food, all food, all products, etc.) and age cutoff, if defined. The table summarizes rationales in two ways: the factors cited to support action of some kind to address the current state of children's marketing, and secondly, the rationale given for their organization's specific recommendations. All of the information below is based on published policy/ position statements, related materials and discussions with representatives from each organization.

### **Summary**

The table reveals a diversity of opinions related to policy and regulatory changes. While some recommend actions for a range of public and private sector stakeholders, most focus on provincial and federal governments as the primary actors. There is no consensus on the appropriate government intervention but two general camps emerged – legislation to prohibit unhealthy food and beverage marketing or advertising to children versus legislation to prohibit commercial advertising of all products to children. The age threshold varied from 13 to 18 years (some did not identify a cutoff) and the terms “marketing” (a broad set of activities including promotion, pricing, placement, etc.) and “advertising” (promotional activities only) were used inconsistently across the 10 position statements.

While there was no overall consensus on government interventions, there were several areas of alignment. All organizations agreed that: 1) children are uniquely vulnerable to marketing influences and deserve protection; 2) the children's marketing environment and the current system of industry self-regulation in Canada are unacceptable; and, 3) legislation is the most appropriate solution (many called for immediate action, fewer suggested legislation only as a next step).

In reviewing the position statements, it's important to recognize the variations in the initial framing and depth of analyses of different organizations. Some started with a scope limited to food and beverages, some were led to that framing by their review of evidence, while others assessed the impact of the children's marketing environment more broadly. The diversity of opinions suggests lack of agreement on the scope of the problem, as well as desired outcomes (reduced obesity, improved diet, children's overall health and well-being, children's rights, etc.). All positions were informed by scientific evidence on child development and marketing's influence but, in general, the review found little assessment of the feasibility and effectiveness of policy implementation. An analysis of the practicalities and outcomes related to different legislative options is an important gap in the discussion to date.

## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

Organization	Summary/ Key Recommendations	Regulatory Approach	Scope	Age cutoff	Rationale	Notes
<b>Alberta Policy Coalition for Chronic Disease Prevention - Consensus Conference<sup>1</sup></b>	“...we recommend: -A Canadian (federal) government-led national regulatory system prohibiting all commercial marketing of foods and beverages to children under 18 years of age, with exceptions for ‘approved public health campaigns promoting healthy diets’.” (2011)	Legislation	All commercial marketing of foods and beverages to children	< 18	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Childhood obesity</li> <li>▪ Effectiveness of children’s marketing</li> <li>▪ Children’s cognitive vulnerability</li> <li>▪ TV ads of nutritionally poor foods and beverages is prevalent in Canada</li> <li>▪ Industry self-regulation is not sufficient</li> </ul> <p><b>Rationale for Specific Policy/ Position:</b> The recommendations are consistent with the second most comprehensive approach advocated in the WHO Marketing Framework of 2012.</p> <p>Consensus conference participants discussed a full Quebec-style prohibition of all marketing (not restricted to foods and beverages), but didn’t reach consensus. The conference focused on childhood obesity, and not the merits of commercial-free environments for children.</p>	In April 2011, the Alberta Policy Coalition for Chronic Disease Prevention convened a consensus conference on environmental determinants of obesity such as marketing of unhealthy foods and beverages to children. Participants examined the political environment, evidence, issues, and challenges of placing restrictions on the marketing of unhealthy foods and beverages to children in Canada.
<b>Association of Local Public Health Agencies<sup>2</sup></b>	“...be it resolved that the Association of Local Public Health Agencies also support the broader goal of the Ontario Public Health Association and other organizations that are advocating for a ban on all commercial advertising targeted to children under 13 years of age.” (2009)	Legislation	All commercial advertising targeted to children	< 13	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Parents should not have to compete with the well-resourced machinery of marketing persuasion when making healthy choices for children.</li> <li>▪ Direct marketing to young children is by definition manipulative, a position endorsed by the Supreme Court of Canada</li> </ul> <p><b>Rationale for Specific Policy/ Position:</b> A ban on all commercial advertising to children is the best approach for creating environments supportive</p>	<p>The Association had called for a ban on all commercial advertising of food and beverages targeted to children in 2008 but broadened to a total ad ban a year later.</p> <p>alPHA notes that broad consultation with key experts (e.g. child development, health, nutrition, media literacy and communications) will be required but that industry stakeholder consultations should focus solely on implementation matters rather than defining the policy itself.</p>

## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

					of making healthy choices.  A ban on unhealthy food and beverages only would be ineffective in practice because of the difficulty of defining “healthy” and the potential for industry to exploit loopholes.	The 2008 children’s food ad ban resolution is still active and treated as a distinct position that is complemented by the broader 2009 one. Both resolutions are included in relevant communications to ensure that the public health rationale behind banning children’s ads (i.e. influence of unhealthy food ads) is always clear, while also noting their endorsement of a broader ban.
<b>Canadian Medical Association<sup>3</sup></b>	“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.” (2013)	Legislated	Marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or sodium.	< 13 ("at a minimum")	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Young children lack the cognitive ability to understand the persuasive intent of marketing</li> <li>▪ Advertising to children is influential</li> <li>▪ Children in Canada are exposed to high levels of unhealthy food marketing &amp; advertising</li> <li>▪ Childhood obesity &amp; dietary factors contributing to cancer, heart disease and stroke</li> <li>▪ Evidence of public support for unhealthy food marketing regulations</li> </ul> <p><b>Rationale for Specific Policy/ Position:</b> CMA signed on to the Hypertension Advisory Committee 2013 policy statement. HAC's review found that most of the available evidence focused on restrictions on unhealthy food and beverages as a dietary risk and most of the experience globally focused on unhealthy food advertising regulations.</p>	<p>CMA endorsed the Hypertension Advisory Committee 2013 policy statement and adopted it as CMA policy.</p> <p>Dr. Anna Reid, CMA President, noted in the press release that “young children are easily influenced by commercial claims and have no way of knowing whether they are true. Meanwhile, children in Canada are subjected to ads for unhealthy foods up to six times an hour during children’s television programs.”</p>
<b>Center for Science in the Public Interest (Canada)<sup>4</sup></b>	“In our view, the better way is to adopt the Quebec approach of enacting legislation to blocking all ads directed at children (not just junk food ads) based on the recognition that children lack the	Legislation	All commercial advertising targeted to children	< 16/18	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Children lack the cognitive maturity and life experience to properly interpret commercial advertising</li> <li>▪ Advertising to children, therefore, is manipulative and probably meets the legal definition of “misleading, deceptive and unconscionable</li> </ul>	<p>CSPI has a long history of advocacy in Canada on the issue. This began with a 2002 submission to the Romanow Commission on the Future of Health Care in Canada and a 2004 campaign with national and regional partners to advocate federal legislation to ban all commercial</p>

## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

	cognitive maturity and life experience to properly interpret commercial advertising, but to raise the age cut-off to 16 or 18.” (2013)				<p>conduct” in many jurisdictions.</p> <p><b>Rationale for Specific Policy/ Position:</b>  “Because of the unique vulnerability of children, all advertising directed to them amounts to trickery. Advertising should be targeted to parents or other adults.”</p> <p>Evidence of children’s vulnerability and the influence of modern marketing has become even stronger since the Supreme Court upheld the Quebec ad ban in 1989.</p> <p>A nutrient-based ad ban would be inadequate:  “Establishing enforceable, legally sustainable nutrient-based limits on advertising to children may be impossible, or exceedingly difficult and time-consuming”.</p> <p>Analyses of the UK’s “junk food ad ban” show relatively minor reductions in foods ads and a WHO report shows an increase in the volume of children’s ad exposures.</p> <p>A total ad ban would also lead to fewer ads promoting sedentary play and would reduce loopholes for junk food ads. Nutrient-based ad limits would not lead to the proliferation of ads for healthier foods, which the UK example has shown.</p>	<p>advertising targeted to children, especially beyond Quebec’s borders.</p> <p>Raising the age cutoff to 16 or 18 years is “consistent with a considerable body of scientific evidence and expert opinion. Extending protection to older children is consistent with many long-standing legal conventions in Ontario and Canada.”</p>
<b>Childhood Obesity Foundation</b> <sup>5</sup>	“The province of BC should advocate for active federal involvement in regulating marketing food and beverages to children. Our province should also identify the powers that it wields	Not specified, notes gov’t regulation in general	Marketing of unhealthy food and beverages	Not stated	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Childhood obesity</li> <li>▪ Ethically irresponsible to market unhealthy food to children who believe what they are told</li> <li>▪ Current industry self-regulation has inherent conflict of interest</li> </ul>	<p>COF recently signed on to the Hypertension Advisory Committee’s consensus recommendations.</p> <p>COF framed the problem as "marketing" (a broader set of activities) instead of "advertising" (referring to promotional</p>

## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

	<p>that can be used to restrict the marketing of unhealthy food and beverage within British Columbia.</p> <p>In view of the evidence and of public sentiment, government should analyze the practicality of restricting the marketing of unhealthy food and beverages to children and of taxing sugar sweetened beverages.” (2013)</p>				<p><b>Rationale for Specific Policy/ Position:</b> COF’s mission is to identify, evaluate and promote best practices in healthy eating and active living in order to prevent the development of overweight and obesity. Their review found a very strong link between the marketing of unhealthy foods and beverages to children and youth. The link between all marketing to children (or the marketing of sedentary activity to children and youth) was seen as more contentious and lacking sufficient evidence. A broader ban was also seen as inviting greater opposition and would be a higher hurdle to achieving an effective policy.</p>	<p>activities only) as advertising was seen as too limiting a term for the broad range of persuasive activities that companies use to influence children and youth.</p> <p>No age cutoff was identified because the research didn’t provide convincing evidence for one specific age threshold. COF hopes to see this question clarified with a future analysis.</p> <p>COF is focused currently on a consensus building process with other NGOs across Canada and moving forward with a common position/platform.</p>
<p><b>Chronic Disease Prevention Alliance of Canada<sup>6</sup></b></p>	<p>“That the federal government - and if necessary other governments in Canada – introduce regulatory regimes to comprehensively prohibit the direct marketing of unhealthy foods and beverages to children.”</p> <p>“That the food and beverage industry, in collaboration with civil society and governments, augment the marketing of healthy foods and beverages to children.” (2008)</p>	<p>Legislation</p>	<p>Marketing of unhealthy foods and beverages to children</p>	<p>Not stated</p>	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ The marketing of food and beverages to children impacts their food and beverage choices</li> <li>▪ The majority of foods and beverages marketed to children are unhealthy</li> <li>▪ Unhealthy food and beverage choices contribute to childhood obesity.</li> </ul> <p><b>Rationale for Specific Policy/ Position:</b> A comprehensive ban on all children’s ads was seen as a potential barrier to the opportunity for companies, governments or civil society to market healthy foods to kids.</p>	<p>CDPAC has had several meetings with the federal Minister of Health and senior staff at PHAC and Health Canada on the issue. CDPAC reps have also met with Advertising Standards Canada and members of the Children’s Food &amp; Beverage Advertising Initiative.</p> <p>CDPAC Advocacy Workgroup is looking at the issue again with the potential for expanding the scope of its current position, possibly in fall 2014.</p>
<p><b>Dietitians of Canada<sup>7</sup></b></p>	<p>“A step-wise approach is recommended beginning with closing the gaps in self-regulation by setting consistent science-based</p>	<p>Voluntary, with timelines for legislation based on</p>	<p>Advertising of foods high in saturated fats, trans-fatty acids,</p>	<p>Not stated</p>	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Poor quality of children’s diets and increasing trend in childhood obesity</li> <li>▪ Food ads influence children’s food</li> </ul>	<p>The 2010 position was actively promoted at the time of release and DC has advocated to industry for more effective self-regulation and transparent reporting.</p>

## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

	<p>standards for criteria of healthy and less healthy foods and beverages.”</p> <p>“- A two-to-three-year period to establish the criteria and apply the framework within a self-regulated system is reasonable to assess its impact at reducing advertising to children.”</p> <p>“If self-regulation is determined at that time to be ineffective, using pre-established benchmarks set by the federal government, then a legislative approach would be essential.” (2010)</p>	progress	free sugars, or salt		<p>preferences, purchase requests and choices</p> <ul style="list-style-type: none"> <li>▪ Advertised foods are overwhelmingly those products considered to be highly processed, energy dense and nutrient poor</li> <li>▪ Industry self-regulatory system isn’t sufficient</li> <li>▪ Young children lack the ability to critically assess advertising messages and to understand their persuasive intent</li> </ul> <p><b>Rationale for Specific Policy/ Position:</b></p> <ul style="list-style-type: none"> <li>▪ Acknowledged that some food companies had made initial attempts via voluntary changes, but that science-based standards needed to be developed and once in place all food companies needed to follow them.</li> <li>▪ Legislation requires convincing evidence, extensive engagement of policy makers and substantial resources for monitoring and enforcement. This position was a first step.</li> </ul>	<p>DC-Ontario cited the position in a Sept 2012 submission to the Healthy Kids Panel, &amp; recommended to “Establish policies to promote healthier food options, reduce exposure to marketing of unhealthy food and beverages, and increase consumers’ knowledge of nutrient content of foods.”</p> <p>DC acknowledges the need to update the 2010 position based on latest evidence.</p> <p>No age cutoff was stated but the evidence suggests that because children 8-12 watch so much television, and therefore see so many food ads, they may be the group most affected by food marketing.</p> <p>Teaching media literacy skills to children was not seen as a strong option for attenuating the effects of food advertising.</p>
<p><b>Heart and Stroke Foundation of Canada<sup>8</sup></b></p>	<p>HSF recommends that governments restrict the commercial marketing of food and beverages to children.</p>	Legislation	All commercial marketing of food and beverages to children.	Not stated	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Makes life easier for parents.</li> <li>▪ Children are vulnerable and most children do not understand the persuasive intent of marketing messages.</li> <li>▪ Canadian children have poor eating habits and a majority of marketed food and beverage</li> </ul>	<p>Currently focused on a consensus building process with other NGOs across Canada and moving forward with a common position/platform.</p> <p>In 2014, HSF changed its position on restricting marketing to children. A draft</p>

## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

	<p>Recommendations identify specific techniques that regulations should encompass:</p> <p>“promotion through advertisements on television, billboards, magazines, direct mail, radio, internet ads, advergaming, social media ads, video games, online contests, celebrity endorsements, sponsorships, mascots, campaigns that resemble health promotion programs and the gamification of food and beverages as well as any promotion in child focused settings like schools, recreation centres, entertainment complexes and children’s events.”</p>				<p>products are high in salt, fat and/or sugar calories. Consumption of unhealthy foods has contributed to an increase in chronic diseases. Chronic diseases take 67% of all health care spending.</p> <p><b>Rationale for Specific Policy/ Position:</b> More feasible than selective restriction of items of policy implementation and evaluation (avoids the challenge of defining unhealthy foods and it would still allow for public health campaigns to promote healthy unprocessed food).</p>	<p>“Fact Sheet” has been developed stating the new position.</p>
<p><b>Hypertension Advisory Committee<sup>9</sup></b></p>	<p>“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.” (2013)</p>	<p>Legislated</p>	<p>Marketing of foods and beverages high in saturated fats, trans-fatty acids, free sugars or sodium.</p>	<p>&lt; 13 ("at a minimum")</p>	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Young children lack the cognitive ability to understand the persuasive intent of marketing</li> <li>▪ Advertising to children is influential</li> <li>▪ Children in Canada are exposed to high levels of unhealthy food marketing &amp; advertising</li> <li>▪ Childhood obesity &amp; dietary factors contributing to cancer, heart disease and stroke</li> <li>▪ Evidence of public support for unhealthy food marketing regulations</li> </ul> <p><b>Rationale for Specific Policy/ Position:</b> At the time of writing, the WHO had recently published recommendations that further supported restrictions on unhealthy food as a strategy to improve children’s diets &amp; prevent diet-related</p>	<p>The policy statement and supporting resources are available on the Hypertension TALK website as well as some HAC member websites.</p> <p>A letter promoting the positions was sent to all provincial and territorial Ministers of Health as well as to the Federal Health Minister.</p> <p>HAC was planning further activities but some member organizations are now pursuing specific marketing to kids (M2K) initiatives, so HAC plans are on hold but looking forward to supporting a broader cohesive campaign.</p>

## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

					<p>diseases.</p> <p>HAC’s literature review found that most of the available evidence focused on restrictions on unhealthy food and beverages as a dietary risk. There wasn’t enough evidence, or the right kind, to convince all HAC members to support a broader Quebec-style ad ban. However, it was debated and discussed. A ban on all food advertising to children was also discussed but most of the experience globally focused on unhealthy food ad regulations.</p> <p>It was also the Committee’s first policy position so there was interest in finding an area of consensus to move forward.</p>	
<b>Ontario Medical Association<sup>10</sup></b>	“The Ontario Medical Association recommends that governments address legislation to restrict advertising to children under 13 years of age for certain food products that are obesogenic.” (2005)	Legislation	Unhealthy food advertising to children (“obesogenic foods”)	< 13	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Rise in childhood obesity. “Three-quarters of overweight kids will remain so in adulthood, with health effects ranging from diabetes to certain types of cancer to heart disease”.</li> <li>▪ Advertising influences food choices and dietary habits which can have long-term implications for weight gain and obesity.</li> </ul>	In 2012, the OMA called for “aggressive new measures to help prevent thousands of premature deaths associated with obesity”, including a renewed call for the Government of Ontario to restrict “marketing of fatty and sugary foods to children” <sup>11</sup> .
<b>Ontario Public Health Association<sup>12</sup></b>	“Now therefore be it moved that the Ontario Public Health Association call for a ban on all commercial advertising targeted to children under 13 years of age by the Government of Ontario, the Government of Canada or both” (2008)	Legislation	All commercial advertising targeted to children	< 13	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Children are exposed to a greater intensity and frequency of marketing than any previous generation</li> <li>▪ Younger children lack the cognitive abilities to understand marketing messages</li> <li>▪ There is strong evidence that food advertising has a direct influence on what children choose to eat and indirectly exerts pressure on parents to choose those things</li> <li>▪ The dominant focus of commercial ads targeted</li> </ul>	<p>OPHA partnered with the Nutrition Resource Center on a Feb 2013 knowledge exchange and transfer event on marketing to children.</p> <p>In 2011, OPHA created a Marketing to Children Network as a forum to foster collaboration across health units in Ontario.</p>



## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

					<p>to kids is for products that undermine parents’ and public health professionals’ efforts to promote healthy diets and physical activity;</p> <ul style="list-style-type: none"> <li>▪ Industry initiatives promising to change advertising to children have proven to be ineffective</li> </ul> <p><b>Rationale for Specific Policy/ Position:</b></p> <ul style="list-style-type: none"> <li>▪ Targeting children with commercial advertising of any kind is fundamentally unethical</li> <li>▪ A nutrient-based ad ban would leave too many loopholes</li> <li>▪ The Supreme Court of Canada ruled that the Quebec ad ban is a reasonable limit on the right to free speech and that “...advertising directed at young children is per se manipulative”</li> <li>▪ Canada has all of the legal and administrative structures already in place to implement a total children’s ad ban. The same is not true for other approaches.</li> </ul>	
<p><b>Ontario Society of Nutrition Professionals in Public Health<sup>13</sup></b></p>	<p>“...the government of Ontario should implement legislation that prohibits all commercial advertising targeted to children under 13 years of age.” (2013)</p>	<p>Legislation</p>	<p>All commercial advertising targeted to children</p>	<p>&lt; 13</p>	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Children are exposed to a greater intensity and frequency of marketing than any previous generation</li> <li>▪ Younger children lack the cognitive abilities to understand marketing messages</li> <li>▪ There is strong evidence that food advertising has a direct influence on what children choose to eat and indirectly exerts pressure on parents to choose those things</li> <li>▪ The dominant focus of commercial ads targeted to kids is for products that undermine parents’ and public health professionals’ efforts to promote healthy diets and physical activity</li> <li>▪ Recent industry initiatives promising to change advertising to children have proven to be</li> </ul>	<p>OSNPPH participated in the October 2013 Ontario Ministry of Health consultations on children’s advertising. In Nov. 2013, the Co-Chairs submitted a letter to the Minister of Health advocating OSNPPH’s position. The organization is now in the process of developing a briefing note to support their advocacy.</p>

## Review of Selected Position Statements on Children’s Marketing/ Advertising June 2014

					<p>ineffective</p> <p><b>Rationale for Specific Policy/ Position:</b></p> <ul style="list-style-type: none"> <li>▪ Targeting children with commercial advertising of any kind is fundamentally unethical</li> <li>▪ A nutrient-based ad ban would leave too many loopholes</li> <li>▪ Industry self-regulation has proven to be ineffective</li> </ul>	
<p><b>Toronto Board of Health</b><sup>14</sup></p>	<p>“...in order to support parents and protect children as part of an overall health strategy, [<i>the Board of Health</i>] called for a total ban on all commercial advertising targeted to children under 13” (2010)</p>	<p>Legislation</p>	<p>All commercial advertising targeted to children</p>	<p>&lt; 13</p>	<p><b>General Rationale for Action:</b></p> <ul style="list-style-type: none"> <li>▪ Children are exposed to a greater intensity and frequency of marketing than any previous generation</li> <li>▪ Younger children lack the cognitive abilities to understand marketing messages</li> <li>▪ There is strong evidence that food advertising has a direct influence on what children choose to eat and indirectly exerts pressure on parents to choose those things</li> <li>▪ The dominant focus of commercial ads targeted to kids is for products that undermine parents’ and public health professionals’ efforts to promote healthy diets and physical activity</li> <li>▪ Recent industry initiatives promising to change advertising to children have proven to be ineffective</li> </ul> <p><b>Rationale for Specific Policy/ Position:</b></p> <ul style="list-style-type: none"> <li>▪ Targeting children with commercial advertising of any kind is fundamentally unethical</li> <li>▪ A nutrient-based ad ban would leave too many loopholes</li> <li>▪ Industry self-regulation has proven to be ineffective</li> </ul>	<p>Toronto Public Health staff (who report to the Board of Health) drafted a briefing report on children’s advertising in 2008<sup>15</sup>. The Board of Health adopted the report’s recommendations, urging governments to “prohibit all commercial advertising of food and beverages to children under the age of thirteen years”. In 2010, while considering a staff update report, the Board passed an expanded motion calling for a total ban on all commercial advertising to children.</p> <p>TPH has worked with local, provincial and national partners to advocate its position to policy makers. TPH has also worked locally to support Toronto Children’s Services and the Toronto Public Library Board to implement policies restricting child-targeted advertising in their facilities.</p>

# Review of Selected Position Statements on Children’s Marketing/ Advertising

## June 2014

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# Review of Selected Position Statements on Children's Marketing/ Advertising

## June 2014

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<sup>15</sup> Toronto Board of Health (2008). "Food and Beverage Marketing to Children". Staff report HL12.1 considered on February 26, 2008. See the Board's Decision document, available from <http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2008.HL12.1>.