# HL11.1

# M TORONTO

# STAFF REPORT ACTION REQUIRED

# Stop Marketing to Children: A Window of Opportunity

Date:	April 11, 2016
То:	Toronto Board of Health
From:	Medical Officer of Health
Wards:	All
Reference Number:	

# SUMMARY

Governments have increasingly taken an interest in policy interventions to prevent childhood obesity and protect children's rights and wellbeing. Legislated restrictions on commercial marketing to children and youth is one such policy approach that has gained traction in recent years.

Recent developments at the federal level have brought the issue of marketing to children to the national agenda. Restrictions on commercial marketing of foods and beverages to children, proposed by the senate and a national advocacy coalition and signalled by the federal government, would help address the impacts of commercial marketing on childhood obesity. They also mark an important first step in addressing a broader range of health issues facing children and youth, including sedentary behaviour and other aspects of physical and emotional health and wellbeing, along with supporting internationally recognized principles of children's rights.

Since 1979, the Board of Health has advocated for comprehensive restrictions on commercial marketing targeted to this vulnerable group. In 2010, the BOH supported a comprehensive restriction on all commercial advertising targeted to children under the age of thirteen, directing this recommendation to both federal and provincial governments, as well as to municipal partners. This position strengthened earlier support of prohibitions on all commercial advertising of food and beverages to children.

Recent research provides evidence to strengthen the current BOH position by recommending restrictions on all commercial marketing to children and youth age sixteen and under. This would provide the most protection for children's rights and wellbeing.

# RECOMMENDATIONS

#### The Medical Officer of Health recommends that:

- 1. The Board of Health request the Government of Canada to:
  - a. implement a ban on all commercial marketing to children aged sixteen years and under, in order to provide the most comprehensive protection of child and youth rights and health; and
  - b. as an important first step, act swiftly to implement recommendations on commercial marketing of all foods and beverages to children signalled in both the Minister of Health's Mandate Letter of November 12, 2015 and the Senate Report on *Obesity in Canada;*
- 2. The Board of Health request the Ontario Minister of Health and Long Term Care to support the Government of Canada in implementing restrictions on marketing to children, as per the recommendations in the provincial Healthy Kids Panel (HKP) report;
- The Board of Health forward this report to the Ontario Ministries of Children and Youth Services, Education, Government Services, Health and Long-Term Care, Health Promotion, to Health Canada, Industry Canada, the Canadian Food Inspection Agency and the Public Health Agency of Canada;
- 4. The Board of Health forward this report to the Toronto Food Policy Council, the General Managers of Parks, Forestry and Recreation, Children's Services, and Economic Development and Culture, the Chairs of the Toronto Transit Commission and the Toronto Public Library Board, the Directors of the Toronto District School Board, the Toronto Catholic District School Board, Conseil scolaire de district catholique Centre-Sud, and Conseil scolaire de district du Centre Sud-Ouest to increase their awareness of the impact of commercial marketing on children's health and wellbeing;
- 5. The Board of Health forward this report to the Stop Marketing to Kids (M2K) Coalition via the Heart & Stroke Foundation and Childhood Obesity Foundation; and
- 6. The Board of Health forward this report to Advertising Standards Canada, the Canadian Association of Broadcasters, the Canadian Marketing Association and the Association of Canadian Advertisers.

#### **Financial Impact**

The recommendations will have no financial impact beyond what has already been approved in the current year's budget.

# **DECISION HISTORY**

On February 26, 2008, the Board of Health considered a report from the Medical Officer of Health on *Food and Beverage Marketing to Children* (http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2008.HL12.1) and on April 21, 2008 the follow-up report *Chronic Disease Prevention Alliance of Canada Policy Consensus Conference – Obesity and the Impact of Marketing on Children* (http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2008.HL13.1). The Board unanimously approved a recommendation to urge the federal and provincial governments to prohibit all commercial advertising of food and beverages to children under the age of thirteen years and made a series of related recommendations.

On February 16, 2010, after considering *Food Advertising to Children: Update*, the Board of Health passed a motion calling for a total ban on all commercial advertising targeted to children under thirteen, directing this to federal and provincial government agencies (http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2010.HL28.2).

On August 20, 2010 the Board of Health passed recommendations from *Advertising to Children*, including a request to the City Manager to develop a corporate policy on commercial advertising at City facilities, events and public locations that includes the prohibition of advertising targeted to children, for City Council's consideration; and requested the TTC and other City agencies, boards and commissions to develop policies on commercial advertising that include a prohibition of advertising targeted to children (http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2010.HL33.3).

On March 25, 2013, the Board of Health considered the TPH staff report entitled, *The Ontario Healthy Kids Panel Report* and recommended the Minister of Health and Long-Term Care strengthen the HKP recommendation to ban the marketing of "high-calorie, low-nutrient foods, beverages and snacks to children under age 12" with a ban on all commercial advertising/marketing to children under 13 years old (http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.HL20.5).

# **ISSUE BACKGROUND**

The 2014 *Ottawa Principles* on commercial marketing to children defines marketing as "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."<sup>1</sup> Commercial marketing is distinct from non-commercial marketing for public health education or public awareness campaigns. Advertising, or direct communication intended to promote a brand, product or service, is just one form of marketing that may include more visible forms such as television, radio, print or internet ads. Marketing may also include sales strategies such as product pricing, distribution and in-store placement; media strategies including market research, public relations, and community involvement; and customer support.<sup>2</sup>

Since the 1970s, concerns have been raised about the appropriateness and negative influence of commercial marketing on children's health and well-being. On June 8, 1979 the Board of Health for the former City of Toronto passed a recommendation to "advocate, in appropriate places, for a total ban on all TV ads directed at children."<sup>3</sup> Marketing has reappeared as a public health issue in recent years amid concerns expressed by provincial, federal, and international community organizations and government agencies related to its impact on child health. Rising levels of childhood obesity and poor eating habits, as well as concerns about the sexualisation of childhood, the promotion of sedentary activities and excess consumption of consumer goods, have all contributed to an increased public debate about the appropriateness of advertising to children.

To date, most of the interest in restricting commercial marketing to children and youth has come from stakeholders concerned about childhood obesity and healthy eating. This is because childhood obesity is a major health concern: Toronto Public Health's Student Survey found that 29% of students in grades 7-12 in Toronto have overweight or obese status.<sup>4</sup> In addition, only one in eight Toronto students (grades 7-12) is eating enough fruits and vegetables, while one in five drinks sugar-sweetened beverages and eats salty snacks more than three times a week.<sup>4</sup> As a result, Canadian stakeholders have tended to advocate for, as a starting point, targeted restrictions on commercial marketing of food and beverages.<sup>5</sup> However, obesity is not the only health issue facing children who are exposed to marketing. Children and youth are exposed not only to food advertising but to sexualized<sup>6</sup> and gendered<sup>7</sup> images, violence,<sup>8</sup> sedentary activities,<sup>9</sup> childhood gambling,<sup>10</sup> alcohol,<sup>11 12</sup> e-cigarettes,<sup>13</sup> energy drinks,<sup>14</sup> and cross-promotional tie-ins (e.g. toy promotions)<sup>15</sup> that are not captured by a more targeted restriction but have impacts on children's health, both physical and emotional.<sup>16</sup>

Marketing can impact children's physical health by normalizing unhealthy behaviour and encouraging unhealthy consumption of products which play a significant role in the prevalence of non-communicable diseases and injuries.<sup>17</sup> For example, research shows consumption of sugar-sweetened beverages is a key factor in the rising rates of diabetes, obesity, and poor nutrition among children.<sup>24</sup> Marketing techniques themselves, such as the use of gendered, sexualized and violent imagery, are also associated with negative impacts on children's mental and emotional health and well-being.<sup>5 6 7</sup> Marketing also aims to create and cultivate children as consumers, perpetuating a consumer-driven society with implications for public health and environmental sustainability.<sup>8</sup>

Voluntary industry-led approaches such as that taken by Advertising Standards Canada are insufficient to reduce children's exposure to advertising. While industry-sponsored reports indicate high levels of adherence to voluntary codes, scientific, peer-reviewed papers show persistently high levels of advertising to children.<sup>18</sup> Peer-reviewed research also shows that companies participating in voluntary self-regulation initiatives used more food and beverage promotions, more media characters and more repetition than non-participating companies.<sup>19</sup>

Since 1980, children in Quebec have had the greatest protection from child-directed commercial marketing. Quebec regulates all commercial advertising targeting children under the age of thirteen years under the *Quebec Consumer Protection Act*.<sup>20</sup> Comprehensive approaches such as that implemented in Quebec have been found to be more effective and easier to implement and enforce than partial or targeted approaches focused exclusively on foods and beverages, healthy or unhealthy.<sup>21</sup> The broad scope captures integrated marketing (e.g. toy-movie-food ties-ins, fast food characters promoting brands), leaving fewer loopholes and making this the most feasible option in terms of legislation and enforcement.<sup>22</sup> Furthermore, this approach is effective: a scientific review of Quebec's policy found that families were thirteen per cent less likely to purchase fast food in any given week, and that the regulations reduced fast food consumption by US\$88 million per year.<sup>21</sup>

# COMMENTS

### Why do Children Require Unique Protection from Exposure to Marketing?

Children today are exposed to a greater intensity and frequency of marketing than any previous generation.<sup>2</sup> The number of TV advertising spots viewed by Toronto children is increasing,<sup>23 24</sup> and in addition to TV advertising, marketing strategies now include advergaming (brand-promoting online video games), social media (Facebook fan pages, company Twitter accounts), advertising on mobile devices, and display ads on children's websites.<sup>25</sup> The average Canadian child watches up to eight hours of screens every day.<sup>26</sup> As the Nova Scotia Department of Health and Wellness has noted, this screen time is not only sedentary time; it is advertising time.<sup>9</sup> Marketing targeted to children has a direct influence on children's choices and indirectly exerts pressure on parents: Canadian children influence at least \$20 billion in annual household purchases,<sup>27</sup> making them a lucrative target for marketers as current and future consumers.

Consistent with existing legislation, such as Quebec's *Consumer Protection Act*,<sup>16</sup> and extensive scientific research on the impact of marketing on young children,<sup>14</sup> the Toronto Board of Health has, to date, recommended policies that restrict commercial marketing to children younger than thirteen years of age. However, a consensus statement by researchers and health advocates notes that "emerging research reveals that older children still require protection and may be more vulnerable to newer forms of marketing" and that "strong consideration should be given to extending the age of restricting the marketing of unhealthy food and beverages to age 16."

It has long been understood that children under the age of eight lack the cognitive abilities to recognize and understand the persuasive intent of marketing messages<sup>28</sup> while newer research shows older children and young adolescents are capable of identifying advertisements but lack the cognitive capacity to make rational decisions about the marketing messages to which they are exposed.<sup>29</sup> Children and youth are a particularly vulnerable group: there is strong evidence that advertising to children targets developing brains that are not equipped to understand or to resist the lure of advertising.

Commercial marketing to children, "who are hardwired to trust us," <sup>30</sup> is unethical;<sup>31</sup> the Supreme Court of Canada ruled in 1989 that "...advertising directed at young children is *per se* manipulative"<sup>32</sup> and that Quebec's regulations are a reasonable limit on the right to free speech because "(s)uch advertising aims to promote products by convincing those who will always believe".<sup>32</sup> The marketing and advertising of information or products known to be injurious to children's health and wellbeing is inconsistent with the UN Convention on the Rights of the Child, which stipulates that, "(i)n all actions concerning children ... the best interests of the child shall be a primary consideration."<sup>33</sup>

The dominant focus of commercial advertising targeted to children is for products that undermine parents' and public health professionals' efforts to promote healthy diets and physical activity. Research evidence shows that commercial marketing to children and youth can normalize unhealthy behaviour,<sup>34</sup> encourage greater consumption of unhealthy products,<sup>35 36 37</sup> and contribute to rising rates of non-communicable, chronic diseases. Consumption of sugar-sweetened beverages, for example, is a key factor in rising rates of diabetes, obesity, and poor nutrition among children and youth. <sup>38 39 40</sup> Recent research has shown that all food advertising, whether for healthy or unhealthy foods, increases calorie consumption among children. Exposure to food cues in advertising releases ghrelin, a hunger hormone,<sup>41</sup> and increases calorie consumption.<sup>42</sup> The promotion of eating as entertainment through commercial marketing to children has been shown to increase their consumption by up to 50%.<sup>43</sup>

### **Recent Changes in the Canadian Policy Context**

On November 12, 2015, the Prime Minister of Canada issued a Mandate Letter to the Minister of Health directing the Minister to support public health by "introducing new restrictions on the commercial marketing of unhealthy food and beverages to children, similar to those now in place in Quebec." <sup>44</sup> On March 1, 2016, the *Senate Report on Obesity in Canada* recommended that the federal government "immediately conduct a thorough assessment of the prohibition on advertising food to children in Quebec" and "(d)esign and implement a prohibition on the advertising of foods and beverages to children based on that assessment." <sup>45</sup> While these recommendations signal willingness to act, the terminology employed in these recommendations reflects a lack of coherence regarding whether to regulate all commercial marketing or only advertising, whether to restrict marketing of all foods and beverages or ill-defined "unhealthy" ones, the age group for which to set restrictions on commercial marketing, and whether to restrict only food and beverage-related marketing or all child-directed marketing, as is now in place in Quebec. A focus on all forms of marketing and all products is the more comprehensive and child-protective approach.

### **Opportunities for Action**

Despite recommendations regarding marketing to children by key stakeholders and governments, little policy change has occurred in Canada since the introduction of Quebec's advertising regulations in 1980. In 2015 Toronto Public Health endorsed the Ottawa Principles, a series of recommendations related to restricting "the commercial marketing of all food and beverages to children and youth age 16 years and younger"<sup>1</sup> (Attachments 1 and 2). These principles have also been endorsed by a coalition of

organizations and individuals known as the "Stop Marketing to Kids (M2K) Coalition." The coalition, co-led by the Heart and Stroke Foundation and the Childhood Obesity Foundation, officially launched on February 24, 2016 at <u>stopmarketingtokids.ca</u>. Toronto Public Health is a member and active participant of the Stop M2K Coalition. The restrictions endorsed by the Coalition would mark an important first step in addressing significant health issues facing children and youth in Toronto.

The most protective approach for child health and wellbeing overall, one that also supports children's rights, remains a comprehensive restriction on all commercial marketing targeted to this vulnerable group. The Centre for Science in the Public Interest (2009)<sup>46</sup> and the Elementary Teachers' Federation of Ontario (2006)<sup>47</sup> and the Ontario Public Health Association (2008)<sup>48</sup> have also previously called for restrictions on all commercial advertising targeted to children.

Provincially, Ontario's 2013 Healthy Kids Panel report, *No Time to Wait: The Healthy Kids Strategy*,<sup>49</sup> recommended that the province act to "(b)an the marketing of high-calorie, low-nutrient foods, beverages and snacks to children under age 12."<sup>49</sup> Ontario's Ministry of Health and Long Term Care consulted stakeholders (including Toronto Public Health) for "advice on how to reduce marketing of unhealthy food and beverages to children" in the fall of 2013.<sup>50</sup> No further action appears to have been taken to enact this recommendation.

#### Conclusion

Proposed federal interventions restricting marketing of foods and beverages to children and youth mark an important first step in addressing a broad range of health issues facing children and in supporting internationally recognized principles on the rights of children. Federal regulations would also address outstanding Board of Health concerns about commercial marketing to children in the municipal context. The current federal government, senate and provincial interest in marketing restrictions as obesity reduction measures also provides a policy window for advancing the most health protective approach. There is an opportunity for the Board of Health both to support these initiatives and to share the most recent evidence regarding the broader effects of commercial marketing on child and youth health and wellbeing.

# CONTACT

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# SIGNATURE

Dr. David McKeown Medical Officer of Health

### ATTACHMENTS

Attachment 1: The Ottawa PrinciplesAttachment 2: Toronto Public Health Letter Endorsing Ottawa Principles

# REFERENCES

<sup>1</sup> Stop Marketing to Kids Coalition. Ottawa Principles. Available at http://stopmarketingtokids.ca/the-ottawa-principles-2/

<sup>2</sup> Dietitians of Canada 2006 <u>https://www.dietitians.ca/Downloads/Public/Advertising-to-Children-position-paper.aspx</u>

<sup>3</sup> Toronto Board of Health (1979). Children's TV Food Commercials. Report submitted to the Board of Health June 8, 1979 by the Secretary of the Planning and Program Committee.

<sup>4</sup> Toronto Public Health. Healthy Futures: 2014 Toronto Public Health Student Survey. March, 2015. Available at

https://www1.toronto.ca/City%200f%20Toronto/Toronto%20Public%20Health/Performance%20 &%20Standards/Healthy%20School/Files/pdf/StudentHealthSurveyWeb%20FINAL-AODA.pdf

<sup>5</sup> Raine, Kim D., et al. "Restricting marketing to children: Consensus on policy interventions to address obesity." Journal of Public Health Policy 34.2 (2013): 239-253. Available at <a href="http://www.palgrave-journals.com/jphp/journal/v34/n2/full/jphp20139a.html">http://www.palgrave-journals.com/jphp/journal/v34/n2/full/jphp20139a.html</a>

<sup>6</sup> Hatton, E., & Trautner, M. N. (2011). Equal opportunity objectification? The sexualization of men and women on the cover of rolling stone. Sexuality & Culture: An Interdisciplinary Quarterly, 15(3), 256-278. doi: 10.1007/s12119-011-9093-2

<sup>7</sup> American Psychological Association, Task Force on the Sexualization of Girls. (2007). Report of the APA Task Force on the Sexualization of Girls. Available at http://www.apa.org/pi/women/programs/girls/report-full.pdf

<sup>8</sup> Kunkel, Dale, et al. "Report of the APA task force on advertising and children." Washington, DC: American Psychological Association (2004). Available at

http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.459.1736&rep=rep1&type=pdf

<sup>9</sup> Nova Scotia Department of Health and Wellness (no date). Marketing to Children and Youth: A Public Health Primer Department of Health and Wellness. Available at

http://novascotia.ca/dhw/healthy-communities/documents/Marketing-to-Children-and-Youth-A-Public-Health-Primer.pdf

<sup>10</sup> Campaign for a Commercial Free Childhood 2015. Out of Bounds: The NFL's Intensive Campaign to Target Children. Available at

http://commercialfreechildhood.org/sites/default/files/outofbounds.pdf

<sup>11</sup> McClure, Auden C., et al. "Internet alcohol marketing and underage alcohol use." Pediatrics (2016): peds-2015. Available at

http://pediatrics.aappublications.org/content/early/2016/01/05/peds.2015-2149.full

<sup>12</sup> Heung, Carly M., Benjamin Rempel, and Marvin Krank. "Strengthening the Canadian alcohol advertising regulatory system." Canadian journal of public health 103.4 (2012): 263-66.

<sup>13</sup> Best, Catherine, et al. "Does exposure to cigarette brands increase the likelihood of adolescent ecigarette use? A cross-sectional study." BMJ open 6.2 (2016): e008734. Available at http://bmjopen.bmj.com/content/6/2/e008734.short

<sup>14</sup> Pomeranz, J., Munsell, C. and Harris, J. (2013). Energy Drinks: An emerging public health hazard for youth. Journal of Public Health Policy, Vol. 34 (2), 254-271. Available at <u>http://www.palgrave-journals.com/jphp/journal/v34/n2/full/jphp20136a.html</u>.

<sup>15</sup> Longacre, Meghan R., et al. "A toy story: Association between young children's knowledge of fast food toy premiums and their fast food consumption." Appetite 96 (2016): 473-480. Available at <a href="http://www.sciencedirect.com/science/article/pii/S019566631530057X">http://www.sciencedirect.com/science/article/pii/S019566631530057X</a>

<sup>16</sup> <u>A Canadian Health Care and Scientific Organization Policy Consensus Statement on Restricting</u> <u>Marketing of Unhealthy Foods and Beverages to Children and Youth in Canada</u>, produced by Heart and Stroke Foundation and partner organizations (2013).

<sup>17</sup> Hastings, G. (2012). Why corporate power is a public health priority. BMJ: British Medical Journal (Overseas & Retired Doctors Edition), 345(7871), 26-29. Available at

http://www.storre.stir.ac.uk/bitstream/1893/11016/1/bmj.pdf

<sup>18</sup> Galbraith-Emami, Sarah, and Tim Lobstein. "The impact of initiatives to limit the advertising of food and beverage products to children: a systematic review." Obesity Reviews 14.12 (2013): 960-974.

<sup>19</sup> Potvin Kent, Monique, Lise Dubois, and Alissa Wanless. "Self-regulation by industry of food marketing is having little impact during children's preferred television." International Journal of Pediatric Obesity 6.5-6 (2011): 401-408.

<sup>20</sup> Quebec Consumer Protection Act. Available at

http://www2.publicationsduquebec.gouv.qc.ca/dynamicSearch/telecharge.php?type=2&file=/P\_40\_1\_A.html

<sup>21</sup> Dhar, Tirtha, and Kathy Baylis. "Fast-food consumption and the ban on advertising targeting children: the Quebec experience." *Journal of Marketing Research* 48.5 (2011): 799-813. Available at <a href="http://foodsecurecanada.org/sites/default/files/fastfoodconsumption.pdf">http://foodsecurecanada.org/sites/default/files/fastfoodconsumption.pdf</a>

<sup>22</sup> Cook, B. 2009. Policy Options to Improve the Children's Advertising Environment in Canada.
For the Public Health Agency of Canada Health Portfolio Task Group on Obesity and Marketing.
<sup>23</sup> Potvin Kent, M., and A. Wanless. "The influence of the Children's Food and Beverage Advertising Initiative: change in children's exposure to food advertising on television in Canada between 2006-2009." International Journal of Obesity 38.4 (2014).

<sup>24</sup> Potvin Kent, Monique 2016. The Marketing of Foods and Beverages to Children on Television: A Tale of Two Cities. Presented to the CDPAC 2016 Conference Integrated Chronic Disease Prevention: The Value Proposition. Toronto.

<sup>25</sup> Rudd Centre for Food Policy and Obesity 2013. Marketing Unhealthy Food and Beverages to Youth via Mobile Devices. Available at

http://www.uconnruddcenter.org/resources/upload/docs/what/advertising/Mobile\_Marketing\_to\_ Children.pdf

<sup>26</sup> Active Healthy Kids Canada Report Card on Physical Activity for Children and Youth 2012. <u>http://www.participaction.com/programs-events/infographics/screen-time/</u>

<sup>27</sup> Childhood Obesity Foundation 2011 <u>http://childhoodobesityfoundation.ca/wp-content/uploads/2015/02/AMorel food advertising directed at children.pdf</u>

<sup>28</sup> Report of the American Psychological Association Task Force on Advertising and Children 2004 <u>https://www.apa.org/pi/families/resources/advertising-children.pdf</u>

<sup>29</sup> Bergsma, Lynda. "Media literacy and health promotion for adolescents." The Journal of Media Literacy Education 3.1 (2011).

http://digitalcommons.uri.edu/cgi/viewcontent.cgi?article=1060&context=jmle

<sup>30</sup> Dr. Tom Warshowski, Childhood Obesity Foundation. Cited in Report of the Standing Senate Committee on Social Affairs, Science and Technology 2016. Obesity in Canada: A Whole-of-Society Approach for a Healthier Canada. Page 21. Available at

http://www.parl.gc.ca/content/sen/committee/421/SOCI/Reports/2016-02-25\_Revised\_report\_Obesity\_in\_Canada\_e.pdf

<sup>31</sup> Nairn, Agnes, and Cordelia Fine. "Who's messing with my mind? The implications of dual-process models for the ethics of advertising to children." International Journal of Advertising 27.3 (2008): 447-470. Available at

https://www.researchgate.net/profile/Agnes\_Nairn/publication/233894671\_Who's\_messing\_with\_ my\_mind\_The\_implications\_of\_dual-

process models for the ethics of advertising to children/links/53e8a8b60cf2fb7487244710.pdf <sup>32</sup> Irwin Toy Ltd v. Quebec (Attorney General), (1989) 1S.C.R. 927.<u>http://scc-csc.lexum.com/scc-csc/scc-csc/en/item/443/index.do</u>

<sup>33</sup> United Nations Convention on the Rights of the Child. Geneva: United Nations, 2009.

https://treaties.un.org/Pages/ViewDetails.aspx?src=IND&mtdsg\_no=IV-11&chapter=4&lang=en <sup>34</sup> Nicholls, J. (2012). Every day, everywhere: Alcohol marketing and social media – current trends. Alcohol and Alcoholism, 47(4), 486-493

<sup>35</sup> The World Health Organization. (2013). Article 13: Tobacco advertising, promotion and sponsorship. Retrieved from http://www.euro.who.int/en/what-we-do/health-topics/disease-prevention/ tobacco/facts-and-figures/implementation-of-the-who-fctc/areas-for-improvement-within-thewho-european-region/article-13-tobacco-advertising,-promotion-and-sponsorship publications/child\_and\_youth\_drinking.pdf

<sup>36</sup> Jernigan, D. (2010). Alcohol Marketing and Youth: Evidence of a Problem. Retrieved from http:// www.gov.ns.ca/hpp/knowledge\_exchange\_and\_alcohol\_forum/presentations/Knowledge%20 Exchange/HPP\_%20CYDKE\_David%20Jernigan\_Alcohol%20Marketing.pdf

<sup>38</sup> Brownell, K. D., & Frieden, T. R. (2009). Ounces of prevention – the public policy case for taxes on sugared beverages. New England Journal of Medicine, 360(18), 1805-1808.

<sup>39</sup> Mello, M. M., Pomeranz, J., & Moran, P. (2008). The interplay of public health law and industry selfregulation: The case of sugar-sweetened beverage sales in schools. American Journal of Public Health, 98(4), 595-604.

<sup>40</sup> Harvard School of Public Health. (2013). Sugary Drinks and Obesity Fact Sheet. Retrieved from <u>http://www.hsph.harvard.edu/nutritionsource/sugary-drinks-fact-sheet/</u>

<sup>41</sup> Schüssler, Petra. "Ghrelin levels increase after pictures showing food." Obesity 20.6 (2012): 1212-1217. Available at <a href="http://onlinelibrary.wiley.com/doi/10.1038/oby.2011.385/abstract">http://onlinelibrary.wiley.com/doi/10.1038/oby.2011.385/abstract</a>

<sup>42</sup> Folkvord, Frans, et al. "The effect of playing advergames that promote energy-dense snacks or fruit on actual food intake among children." The American journal of clinical nutrition 97.2 (2013): 239-245. Available at <u>http://ajcn.nutrition.org/content/97/2/239.short</u>

<sup>43</sup> Elliott, Charlene. "Marketing foods to children: are we asking the right questions?" Childhood Obesity (Formerly Obesity and Weight Management) 8.3 (2012): 191-194. Available at http://dspace.ucalgary.ca/bitstream/1880/50206/1/2012\_Elliott\_C0.pdf

<sup>44</sup> Government of Canada 2015. Prime Minister's Mandate Letter to the Minister of Health. Available at <u>http://pm.gc.ca/eng/minister-health-mandate-letter#sthash.eOPzna3K.dpuf</u>

<sup>45</sup> Report of the Standing Senate Committee on Social Affairs, Science and Technology 2016. Obesity in Canada: A Whole-of-Society Approach for a Healthier Canada. Available at

http://www.parl.gc.ca/content/sen/committee/421/SOCI/Reports/2016-02-

25 Revised report Obesity in Canada e.pdf

<sup>46</sup> Centre for Science in the Public Interest.(2009)

http://www.cspinet.org/canada/foodmarketing.html

<sup>47</sup> Elementary Teachers' Federation of Ontario (2006)

http://www.etfo.ca/AboutETFO/Governance/PolicyStatements/Pages/default.aspx

<sup>48</sup> Ontario Public Health Association (2008) <u>http://opha.on.ca/getmedia/f1c4536f-9e74-4980-b80e-5339bf59736b/2008-04\_res.pdf.aspx?ext=.pdf</u>

<sup>49</sup> Government of Ontario 2013. Healthy Kids Panel Report: *No Time to Wait: The Healthy Kids Strategy*,

www.health.gov.on.ca/en/common/.../healthy\_kids/healthy\_kids.pdfwww.health.gov.on.ca/en/com mon/.../healthy\_kids/healthy\_kids.pdf

<sup>50</sup> Government of Ontario. Ministry of Health and Long Term Care. Backgrounder. Ontario Consulting On Healthy Eating Initiatives. October 9, 2013. Available at

https://news.ontario.ca/mohltc/en/2013/10/ontario-consulting-on-healthy-eating-initiatives.html

<sup>&</sup>lt;sup>37</sup> Hastings, G. (2012). Why corporate power is a public health priority. BMJ: British Medical Journal (Overseas & Retired Doctors Edition), 345(7871), 26-29.