

Submission to the Standing Senate Committee on Social Affairs, Science and Technology

Study of Bill C-252, An Act to amend the Food and Drugs Act (prohibition of food and beverage marketing directed at children)

October 18, 2024

Introduction

The Stop Marketing to Kids Coalition is made up of ten Steering Committee member organizations including Heart & Stroke (co-chair), Childhood Healthy Living Foundation (co-chair), Alberta Policy Coalition for Chronic Disease Prevention, BC Alliance for Healthy Living, Canadian Cancer Society, Canadian Dental Association, Chronic Disease Prevention Alliance of Canada, Diabetes Canada, Food Secure Canada, and le Collectif Vital. The Stop Marketing to Kids Coalition is endorsed by an additional 92 organizations, several international organizations, and 22 renowned health experts. The Stop Marketing to Kids Coalition encourages policies that adequately protect children from commercial marketing to kids of food and beverages. Through cross-sector collaboration and evidence-informed policy development, our mission is to support the development of restrictions on the marketing of foods and beverages high in sugar, salt and saturated fats in Canada.

The Stop Marketing to Kids Coalition is a strong supporter of Bill C-252, a Private Member's Bill introduced by Ms. Patricia Lattanzio M.P. (Saint-Léonard - Saint-Michel) and co-sponsored by Senator Donna Dasko (Ontario). This bill would amend the Food and Drugs Act by introducing statutory restrictions for food and beverage marketing directed at persons under 13 years of age. This has been a topic of conversation for the federal government for decades. Unfortunately, a previous attempt to adopt similar legislation (Bill S-228) died on the order paper in 2019 despite having majority support in the House and Senate and being supported by 82% of people in Canada at the time¹.

Research in Canada and globally has repeatedly shown that industry self-regulation is not effective at protecting children from exposure to certain food and beverage advertising²⁻¹⁴. Companies participating in Canada's previous self-regulatory code (2007-2020) were found in some instances to advertise more heavily in media intended for¹⁵ or preferred by children than non-participating companies and most of their advertising (>70%) promoted foods considered 'less healthy'¹⁴. Despite more than a decade of self-regulation, children in Canada continue to be targeted by and exposed to food marketing^{16,17}. Much like the previous initiative, industry's new self-regulatory code has many gaps and will not sufficiently protect children.

Healthy eating is one of the most important things we can do for overall health, and children deserve to be protected from the persuasiveness and invasiveness of food and beverage marketing. Reducing the power and exposure of this type of marketing to children will protect children and support parents as they help their children develop healthy eating habits and food preferences.

The Stop Marketing to Kids Coalition recommends the Senate pass Bill C-252 without amendments before the end of this Parliamentary session.

Scope of the problem

Kids are eating too much highly processed food

Ultra-processed food consumption in Canada is highest in children 9-13 years of age, making up nearly 60% of calories in their diets.¹⁸ Such highly processed or ‘ultra-processed foods’ undermine healthy eating.¹⁹ Most are high in salt, sugars, and saturated fat and are generally lower in protein, fibre, vitamins, and minerals.²⁰

Increased consumption of ultra-processed food is associated with a higher risk of all-cause mortality²¹ and high consumption of these foods and/or sugary drinks is associated with increased risk of obesity, cardiovascular disease, stroke, diabetes, cancers and tooth decay compared to lower consumption.²²⁻²⁵ In 2019 alone, dietary risk factors contributed to 36,000 deaths in Canada.²⁶

With children and youth (ages 2-18) getting over half of their calories from ultra-processed foods,¹⁸ and the clear knowledge of the harm to their health, we must act. In 2019, chronic disease impacted by modifiable risk factors like diet cost our health system approximately \$28 billion a year.²⁷

Food and beverage marketing affects children

It has been well-established that food marketing influences what foods children prefer, those they ask their parents for and how much they eat²⁸⁻³⁵. Children are uniquely vulnerable to marketing because of their level of cognitive development^{36,37}. It is therefore alarming that children in Canada are bombarded with marketing for food high in salt, sugar and/or saturated fat on a regular basis across a variety of media and settings.

Each year, the Canadian food and beverage industry spends \$1.1 billion on marketing that may reach children.³⁸ This marketing appeals to children through product design, the use of cartoon or other characters, fantasy and adventure themes, humour, and other marketing techniques.²⁸ Clearly these techniques work as children as young as three are brand aware and are able to recognize or name food and beverage brands.^{39,40}

This marketing to children means:

- Some children aged 2-11 years in Canada are exposed to more than 2,000 food ads on average on broadcast television annually, most of which promote unhealthy foods like fast food and other restaurants, snack foods, candy and chocolate and other dessert foods⁴¹.
- Hundreds of products (n=747) sold in large grocery stores in Ontario target children with spokes characters and other child-directed content on their packaging and the vast majority (97%) are considered high in salt, sugars and saturated fat according to Health Canada’s proposed nutrition criteria⁴².
- Unhealthy food marketing is present in schools⁴³ and in publicly funded recreational centers⁴⁴ where children learn and play.
- Half of 813 food stores (53%) audited across 11 cities in Canada have very prominent product displays at their check-out that push candy, salty snacks and/or beverages on parents and children who cannot easily avoid them when shopping.⁴⁵

Stop Marketing to Kids Coalition

Advocates for restricting food and beverage marketing to kids

- Over 50 million food and beverage ads per year are shown on children's top 10 websites,¹⁴ and their personal identifying information is collected from websites and apps for the purpose of targeted online marketing.^{46,47}
- Children in Canada are observing an estimated 1,500 advertisements annually on social media sites alone.⁴⁸
- Most (>70%) food and beverages marketed on television and online or seen by children in these media are considered 'less healthy'^{14,48} or high in salt, sugar or saturated fat.^{41,49}

We need to protect children from the harmful effects of food and beverage marketing and support parents as they help their children develop healthy eating habits and food preferences.

Most people in Canada support food marketing to kids restrictions

Most people in Canada (68%) support the federal government restricting food and beverage companies from marketing unhealthy food and beverages to children under 13 years, according to a public opinion poll conducted by Pollara Strategic Insights in May 2024⁵⁰. This is not surprising considering this poll also noted that:

- Sixty-four percent of people in Canada are concerned about the amount of food and beverage advertising directed at children.⁵⁰
- Seventy-six percent believe that it is hard for parents to control and monitor the advertising their children see.⁵⁰
- Fifty-eight percent agree that the food and beverage industry has an unfair advantage over parents as it is more likely to influence children's eating and drinking habits.⁵⁰

The failure of self-regulation

Industry self-regulation has failed to protect kids from unhealthy food and beverage marketing.

Research from the United States, Australia, New Zealand, and several European countries overwhelmingly demonstrate that self-regulatory policies are failing to protect children from exposure to unhealthy food and beverage advertising²⁻¹⁰. Canada's experience with industry self-regulation is no exception¹⁰⁻¹⁴. Companies participating in the Canadian Children's Food and Beverage Advertising Initiative (CAI), Canada's former self-regulatory code (2007-2020), were found in some instances to advertise more heavily in media intended for¹⁵ or preferred by children than non-participating companies and most of their advertising (>70%) promoted foods classified as 'less healthy'¹⁴. Despite more than a decade of self-regulation, children in Canada continue to be targeted by- and exposed to- unhealthy food and beverage marketing across media and settings as highlighted above^{16, 17}.

The failure of the CAI and self-regulatory schemes in other countries has been attributed to their lax nutrition criteria and their extremely limited scope^{3,5-14}. Canada's newest self-regulatory code^{51,52} implemented in June 2023 is more of the same. Its nutrition criteria defining what products can be advertised to children are more lenient than criteria proposed by Health Canada. For instance, their unique nutrition criteria for breakfast cereal⁵¹ would allow certain sugary breakfast cereals to be advertised directly to children. The scope of this new code is also limited. For instance, as the code is written, it is unclear whether the placement of advertisements in media specifically intended for children is in of itself considered 'child directed'. As such, it is possible that the placement of unhealthy food advertising in children's media may be permitted if other criteria are met. The code also does not apply to a host of

Stop Marketing to Kids Coalition

Advocates for restricting food and beverage marketing to kids

marketing techniques that influence children as well as media channels and settings where children are exposed. Notable exclusions include but are not limited to:

- Product packaging
- Point-of sale marketing (e.g. product displays)
- Social media, websites, apps, and other digital media popular with children but not specifically intended for them
- Websites with age-verification
- The use of cartoon and promotional characters (e.g. Toucan Sam, Tony the Tiger)
- Premiums (e.g. toys offered with purchases)
- Branded educational materials and fundraising in schools
- Recreational centres

As the industry code is not legally binding, food companies are not obliged to follow it. Furthermore, adherence to the code is not actively monitored and there are no penalties for non-compliance⁵³.

The Solution: Statutory Restrictions

Statutory restrictions are needed to protect children.

Given the consistent failure of self-regulation, it has been established that statutory restrictions are needed to protect children as highlighted in best practice guidelines published by the World Health Organization in 2023⁵⁴. Experience in Canada and abroad have demonstrated that the statutory regulation of food marketing can have a positive impact. In Quebec, commercial advertising directed to children under 13 years has been restricted since the 1980s⁵⁵. Research suggests Quebec's law is associated with less direct targeting of children by unhealthy food and beverage advertising on television. For instance, the frequency of food advertising is lower on children's television stations in Quebec compared to Ontario and children aged 2-11 years in Quebec see fewer food ads featuring child-directed content than their Ontarian counterparts⁵⁶⁻⁵⁷. Quebec's law has also been linked with 13% reduction in the likelihood of purchasing fast food⁵⁸. Though we can't link Quebec's advertising restrictions to changes in children's diet, it is noteworthy that kids in Quebec have previously been documented as having the highest intake of fruit and vegetables in Canada⁵⁹.

Internationally, many countries such as the United Kingdom, Portugal, Norway and Mexico have adopted statutory measures to protect children from unhealthy food marketing⁶⁰. In 2016, Chile led the way by implementing the most comprehensive restrictions on food marketing to date alongside other nutrition policies including front-of-package labelling and a ban on selling and providing unhealthy foods in childcare settings and schools.⁶¹ Following the adoption of these measures, studies showed a decrease in child-directed marketing techniques on product packaging (e.g. cartoon spokes characters) and a reduction in children's exposure to food advertising high in calories, salt, sugar and/or saturated fat⁶²⁻⁶⁴. Food manufacturers also reformulated their products and the purchasing of calories, sugar, sodium, saturated fats and sugary drinks per capita decreased⁶⁵⁻⁶⁸. Product reformulation and changes in purchasing were likely the result of Chile's multiple nutrition policies. By adopting marketing to kids regulations, Canada would join the ranks of countries like Chile who are world leaders in this area for adopting comprehensive multi-pronged policies to improve children's dietary behaviors and health.

Stop Marketing to Kids Coalition

Advocates for restricting food and beverage marketing to kids

Marketing to kids has been studied extensively – it's time to act.

The issue of marketing foods and beverages high in salt, sugar and/or saturated fats to children in Canada has been studied and consulted upon extensively by the federal government. Stakeholders were consulted heavily on food marketing to kids by the Senate Committee on Social Affairs, Science and Technology (SOCl) in 2017 and the House of Commons Committee on Health (HESA) in 2018 when Bill S-228 was being studied. More recently, Bill C-252 was studied by the HESA Committee in 2023. Furthermore, Health Canada has been consulting stakeholders on marketing to kids; holding public consultations on this topic in 2017, 2018 and 2023. Academic research analyzing information from Health Canada's openness and transparency website and the federal lobbyist's registry also show that industry stakeholders have had extensive meetings and interactions with government officials since 2015 on this topic and more so than health-related stakeholders^{69,70}.

Policy recommendation

The Stop Marketing to Kids Coalition recommends the Senate pass Bill C-252 without amendments as soon as possible.

References:

1. Heart & Stroke public opinion poll conducted by Pollara Strategic Insights in May 2018 among 1,500 Canadians (18+)
2. Boyland B, McGale L, Maden N, Hounsome J, Boland A, Jones A. Systematic review of the effect of policies to restrict the marketing food and non-alcoholic beverages to which children are exposed. *Obes Rev.* 2022;23(8):e13447. <https://doi.org/10.1111/obr.13447>
3. Powell LM, Schermbek RM, Chaloupka FJ. Nutritional content of food and beverage products in television advertisements seen on children's programming. *Child Obes* 2013;9(6):524-531. <https://doi.org/10.1089/chi.2013.0072>
4. Frazier WC, Harris JL. *Trends in Television Food advertising to Young People: 2017 update*. University of Connecticut's Rudd Center. 2017. Accessed October 17 2024. https://uconnruddcenter.org/wp-content/uploads/sites/2909/2020/09/FACTS-2017-summary_final.pdf
5. Landwehr SC, Hartmann M. Industry self-regulation of food advertisement to children: Compliance versus effectiveness of the EU Pledge. *Food Policy* 2020;91:101833. <https://doi.org/10.1016/j.obmed.2016.01.004>
6. World Health Organization Regional Office for Europe. *Evaluating implementation of the WHO set of recommendations on the marketing of foods and non-alcohol beverages to children: Progress, challenges, and guidance for next steps in the European Region*. The WHO Regional Office for Europe, Copenhagen, Denmark, 2018. Accessed October 17 2024. [WHO-EURO-2018-3299-43058-60256-eng.pdf](https://doi.org/10.1186/s12966-018-0694-0)
7. Watson WL, Lau V, Wellard L, Hughes C, Chapman K. Advertising to children initiatives have not reduced unhealthy food advertising on Australian television. *J Public Health (Oxf)*. 2017 1;39(4):787–792. <https://doi.org/10.1093/pubmed/fox004>.
8. Watson WL, Pagotto A, Richmon K, Hughes C. Monitoring complaints about food marketing to children under the Australian industry code 2015-20: A qualitative analysis. *Austr N Z J Public Health* 2021;45(5):562-567. <https://doi.org/10.1111/1753-6405.13174>
9. Galbraith-Emami A, Lobstein T. The impact of initiatives to limit the advertising of food and beverage products to children: A systematic review. *Obes Rev* 2013, 14(12):960-974. <https://doi.org/10.1111/obr.12060>
10. Kelly B, Vandevijvere S, Ng S, et al. Global benchmarking of children's exposure to television advertising of unhealthy foods and beverages across 22 countries. *Obes Rev.* 2019;20(S2):116-128. <https://doi.org/10.1111/obr.12840>
11. Potvin Kent M, Smith JR, Pauzé E, L'Abbé M. The effectiveness of the food and beverage industry's self-established uniform nutrition criteria at improving the healthfulness of food advertising viewed by Canadian children on television. *Int J Behav Nutr Phys Act.* 2018;15(1):57. <https://doi.org/10.1186/s12966-018-0694-0>
12. Potvin Kent M, Wanless A. 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. *Int J Obes (Lond)*. 2014;38(4):558–562. <https://doi.org/10.1038/ijo.2014.4>
13. Potvin Kent M, Martin CL, Kent EA. Changes in the volume, power and nutritional quality of foods marketed to children on television in Canada. *Obes Silver Spring Md.* 2014;22(9):2053-2060. <https://doi.org/10.1002/oby.20826>
14. Potvin Kent M, Pauzé E. The effectiveness of self-regulation in limiting the advertising of unhealthy foods and beverages on children's preferred websites in Canada. *Public Health Nutr.* 2018;21(9):1608-1617. <https://doi.org/10.1017/s1368980017004177>

Stop Marketing to Kids Coalition

Advocates for restricting food and beverage marketing to kids

15. Pinto A, Pauzé E, Roy-Gagnon MH, Dubois L, Kent M. The targeting of preschoolers, children, adolescents and adults by the Canadian food and beverage industry on television: A cross-sectional study. *Appl Physiol Nutr Metab* 2021;46(6):651-660. <https://doi.org/10.1139/apnm-2020-0621>
16. Prowse R. Food marketing to children in Canada: a setting-based scoping review on exposure, power and impact. *Health Promot Chronic Dis Prev Can*. 2017; 37(9):274-292. <https://doi.org/10.24095/hpcdp.37.9.03>
17. Potvin Kent N, Hatoum F, Wu D, Remedios L, Bagnato M. 2022 Benchmarking unhealthy food marketing to children and adolescents in Canada: A scoping review. *Health Promot Chronic Dis Prev Can*. 2022;42(8):307-318. <https://doi.org/10.24095/hpcdp.42.8.01>
18. Moubarac JC. *Ultra-Processed Foods in Canada: Consumption, Impact on Diet Quality and Policy Implications*. University of Montreal; 2017. Accessed October 17, 2024. <https://www.heartandstroke.ca/-/media/pdf-files/canada/media-centre/hs-report-upp-moubarac-dec-5-2017.ashx>
19. Health Canada. Canada's Dietary Guidelines for Health Professionals and Policy Makers. January 2019. Accessed October 17, 2024. <https://food-guide.canada.ca/sites/default/files/artifact-pdf/CDG-EN-2018.pdf>
20. Nardocci M, Polsky J, Moubarac JC. How Ultra-Processed Foods Affect Health in Canada. TRANSNUT, Department of Nutrition, University of Montreal; 2019. Accessed October 17, 2024. <https://nutrition.umontreal.ca/wp-content/uploads/sites/45/2019/06/27-june-2019-Consumption-of-ultra-processed-foods-and-chronic-diseases-in-Canadian-adults.pdf>
21. Bonaccio M, Di Castelnuovo A, Costanzo S, et al. Ultra-processed food consumption is associated with increased risk of all-cause and cardiovascular mortality in the Moli-sani Study. *Am J Clin Nutr*. 2021;113(2):446-455. <https://doi.org/10.1093/ajcn/ngaa299>
22. Srour B, Fezeu LK, Kesse-Guyot E, et al. Ultra-processed food intake and risk of cardiovascular disease: prospective cohort study (NutriNet-Santé). *BMJ*. 2019: l1451. <https://doi.org/10.1136/bmj.l1451>
23. Fiolet T, Srour B, Sellem L, et al. Consumption of ultra-processed foods and cancer risk: results from NutriNet-Santé prospective cohort. *BMJ*. 2018: k322. <https://doi.org/10.1136/bmj.k322>
24. Delpino FM, Figueiredo LM, Bielemann RM. et al. Ultra-processed food and risk of type 2 diabetes: a systematic review and meta-analysis of longitudinal studies. *Int J Epidemiol* 2022; 51(4), 1120–1141. <https://doi.org/10.1093/ije/dyab247>
25. Valenzuela, MJ, Waterhouse B, Aggarwal VR, Bloor K, Doran T. Effect of sugar-sweetened beverages on oral health: a systematic review and meta-analysis. *Eur J Public Health*. 2021 Feb 1; 31(1), 122-129. <https://doi.org/10.1093/eurpub/ckaa147>
26. Institute for Health Metrics and Evaluation. Global Burden of Disease Compare | IHME Viz Hub. Published 2019. Accessed October 11, 2021. <http://ihmeuw.org/5eh5>
27. Government of Canada, Public Works, and Government Services Canada. Canada Gazette – Regulations Amending the Food and Drugs Regulations (Nutrition Symbols, Other Labelling Provisions, Vitamin D and Hydrogenated Fats or Oils) Published June 28, 2022. Accessed October 17, 2024. <https://canadagazette.gc.ca/rp-pr/p2/2022/2022-07-20/html/sor-dors168-eng.html>
28. Hastings G, McDermott L, Angus K, Stead M, Thompson S. *The Extent, Nature and Effects of Food Promotion to Children: A Review of the Evidence*. World Health Organization: Geneva, 2006.
29. McGinnis JM, Gootman J, Kraak VI, (eds) *Food Marketing to Children and Youth: Threat or Opportunity* Washington, DC: The National Academies Press, 2006.
30. Cairns G, Angus K, Hastings G, Caraher M. Systematic reviews of the evidence on the nature, extent and effects of food marketing to children. A retrospective summary. *Appetite* 2013;62(1): 209-215. <https://doi.org/10.1016/j.appet.2012.04.017>

Stop Marketing to Kids Coalition

Advocates for restricting food and beverage marketing to kids

31. Sadeghirad B, Duhaney T, Motaghipisheh S, Campbell NRC, Johnston BC. Influence of unhealthy food and beverage marketing on children's dietary intake and preference: a systematic review and meta-analysis of randomized trials. *Obes Rev* 2016;17(10): 945-959. <https://doi.org/10.1111/obr.12445>
32. Norman J, Kelly B, Boyland E, McMahon AT. The impact of marketing and advertising on food behaviours: Evaluating the evidence for a causal relationship. *Cur Nutr Rep* 2016;5(3):139-149. <https://doi.org/10.1007/s13668-016-0166-6>
33. Norman J, Kelly B, McMahon, AT, Boyland EJ. Sustained impact of energy-dense TV and online food advertising on children's dietary intake: A within-subject, randomized, crossover, counter-balanced trial. *Int J Behav Nutr Phys Act* 2018;15(1):37. <https://doi.org/10.1186/s12966-018-0672-6>
34. Smits T, Vandebosch H, Neyens E, Boyland E. The persuasiveness of child-targeted endorsement strategies: A systematic review. *Ann Int Commun Ass* 2015;39(1):311-337. <http://dx.doi.org/10.1080/23808985.2015.11679179>
35. McDermott L, O'Sullivan T, Stead M, Hastings G. International food advertising, pester power and its effects. *Int J Advert* 2006;25(4):513-539. <https://doi.org/10.1080/02650487.2006.11072986>
36. Wilcox BL, Kunkel D, Cantor J, Dowrick P, Linn S, Palmer E. *Report of the APA Task Force on Advertising and Children*. 2004. Accessed October 17 2024. <https://www.apa.org/pi/families/resources/advertising-children.pdf>
37. Carter OB, Patterson LJ, Donovan RJ, Ewing MT, Roberts CM. Children's understanding of the selling versus persuasive intent of the selling persuasive intent of junk food advertising: Implications for regulation. *Soc Sci Med* 2011;72(6):962-968. <https://doi.org/10.1016/j.socscimed.2011.01.018>
38. [Internal Letter]. Industry Response to Health Canada's Request for Input into a "Cost-Benefit Analysis Survey for Restricting Marketing of Unhealthy Food and Beverages to Children in Canada." Published online 2018.
39. Harrison K, Moorman J, Peralta M, Fayhee K. Food brand recognition and BMI in preschoolers. *Appetite*. 2017;114:329-337. <https://doi.org/10.1016/j.appet.2017.03.049>
40. Norman J, Kelly B, McMahon AT, Boyland E, Chapman K, King L. Remember Me? Exposure to Unfamiliar Food Brands in Television Advertising and Online Advergaming Drives Children's Brand Recognition, Attitudes, and Desire to Eat Foods: A Secondary Analysis from a Crossover Experimental-Control Study with Randomization at the Group Level. *J Acad Nutr Diet*. 2020;120(1):120-129. <https://doi.org/10.1016/j.jand.2019.05.006>
41. Potvin Kent M., Guimaraes JS, Pritchard M. et al. Differences in child and adolescent exposure to unhealthy food and beverage advertising on television in a self-regulatory environment. *BMC Public Health* 2023;555. <https://doi.org/10.1186/s12889-023-15027-w>
42. Mulligan C, Christoforou AK, Vergeer L, Bernstein JT, L'Abbé MR. Evaluating the Canadian Packaged Food Supply Using Health Canada's Proposed nutrient criteria for restricting food and beverage marketing to children. *Int J Environ Res Public Health*. 2020 17:1250. <https://doi.org/10.3390/ijerph17041250>
43. Potvin Kent M, Velazquez C., Pauzé, E., Cheng-Boivin, O., Berfeld, N. (2019). The extent of food and beverage marketing in primary and secondary schools in Canada. *BMC Public Health*. 19: 114-124. <https://doi.org/10.1186/s12889-019-6441-x>
44. Prowse RJL, Naylor P-J, Olstad DL et al. Food marketing in recreational sport settings in Canada: A cross-sectional audit in different policy environments using the food and beverage marketing assessment tool for setting (FoodMATS). *Int J Behav Nutr Phys Act*. 2018;15(1):39. <https://doi.org/10.1186/s12966-018-0673-5>
45. Minaker L. Point-of-Sale Marketing to Children in Canada. Evidence from 11 cities. 2023. Accessed October 17, 2024. <https://www.heartandstroke.ca/-/media/pdf-files/what-we-do/news/minakerreportenglishfinal.pdf?rev=60926a3ea0644cc6a524ab3117d8c6eb>

Stop Marketing to Kids Coalition

Advocates for restricting food and beverage marketing to kids

46. Williams D, McIntosh A, Farthing R. *Profiling Children for Advertising: Facebook's Monetisation of Young People's Personal Data*. Reset Australia, 2021, 32 pages.
47. Zhao F, Egelman S, Weeks HM, Kaciroti N, Miller AL, Radesky JS. Data Collection Practices of Mobile Applications Played by Preschool-Aged Children. *JAMA Pediatr*. 2020;174(12):e203345. <https://doi.org/10.1001/jamapediatrics.2020.3345>
48. Potvin Kent, Pauze E, Roy EA, de Billy N, Czoli C. Children' and adolescents' exposure to food and beverage marketing in social media apps. *Pediatr Obes*. 2019;14(6):e12508. <https://doi.org/10.1111/ijpo.12508>
49. Potvin Kent M, Bagnato M, Remedios L, Guimaraes JS, Gillis G, Soto C, Hatoum F, Pritchard M. Child and adolescent exposure to unhealthy food marketing across digital platforms in Canada. *BMC Public Health* 2024;24:1740. <https://doi.org/10.1186/s12889-024-19094-5>
50. Heart & Stroke public opinion poll conducted by Pollara Strategic Insights in May 2024 among 1,603 Canadians (18+)
51. ACA, Canadian Beverage Association, FHCP and Restaurants Canada. *Code for the responsible advertising of food and beverage products to children*. May 2023. Accessed October 17, 2024. <https://acaweb.ca/en/wp-content/uploads/sites/2/2024/02/FoodAndBeverageAdvertisingCode-FINAL-20230505.pdf>
52. ACA, Canadian Beverage Association, FHCP and Restaurants Canada. *Guide for the Responsible advertising of food and beverage products to children*. August 2022. <https://acaweb.ca/en/wp-content/uploads/sites/2/2024/02/FoodAndBeverageAdvertisingGuide-EN20220804.pdf>
53. Ad Standards. *Complaint Procedure under the Code for Responsible Advertising of Food and Beverage Products to Children*. October 25, 2023. Accessed October 17, 2024. <https://adstandards.ca/complaints/complaint-procedure-childrens-food-beverage-advertising/>
54. World Health Organization (WHO). *Policies to protect children from the harmful impact of food marketing WHO guidelines*. WHO 2023. Accessed October 17, 2024. <https://iris.who.int/bitstream/handle/10665/370113/9789240075412-eng.pdf?sequence=1>
55. Office de la protection du consommateur. *Advertising directed at children under 13 years of age: Guide to the application of Sections 248 and 249. Consumer Protection Act*. Accessed October 17, 2024. https://www.opc.gouv.qc.ca/fileadmin/media/documents/consommateur/sujet/publicite-pratique-illegale/EN_Guide_publicite_moins_de_13_ans_vf.pdf
56. Potvin Kent M., Guimaraes JS, Bagnato M al. Broadcast television is not dead: Children's exposure to unhealthy food and beverage advertising on television in two policy environments (Ontario and Quebec): An observational study. *J Nutr* 2023; 153(1): 268-278. <https://doi.org/10.1016/j.tjnut.2022.09.002>
57. Potvin Kent M, Dubois L, Wanless A. Food marketing on children's television in two different policy environments. *Int J Pediatr Obes* 2011; 6:433–441. <https://doi.org/10.3109/17477166.2010.526222>
58. Dhar T, Baylis K. Fast-Food consumption and the ban on advertising targeting children: the Quebec experience. *J Mark Res* 2011;48:799–813. <https://doi.org/10.1509/jmkr.48.5.799>
59. Statistics Canada. Table 13-10-0096-12 Fruit and vegetable consumption, 5 times or more per day, by age group. Accessed October 18, 2024. <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=1310009612>
60. World Cancer Research Fund International. *NOURISHING policy database – Restricting food marketing*. Consulted October 17, 2024. https://policydatabase.wcrf.org/level_one?page=nourishing-level-one#step2=3
61. Corvalan, Reyes M, Garmendia NL, Uauy R. Structural responses to the obesity and non-communicable diseases epidemic – Update on the Chilean law of food labelling and advertising. *Obes Rev* 2019;20(3):367-374. <https://doi.org/10.1111/obr.12099>

Stop Marketing to Kids Coalition

Advocates for restricting food and beverage marketing to kids

62. Solteze F, Reyes M, Taillie LS. et al. Prevalence of child-directed marketing on breakfast cereal packages before and after Chile's Food Marketing law: A pre-post quantitative content analysis. *Int J Environ Res Public Health*. 2019;16(22):4501. <https://doi.org/10.3390/ijerph16224501>
63. Carpentier FRD, Correa T, Reyes M, Taillie LS. Evaluating the impact of Chile's marketing regulations of unhealthy foods and beverages: Preschooler and adolescent children's changes in exposure to food advertising on television. *Public Health Nutr* 2020;23(4):747-755. <https://doi.org/10.1017%2FS1368980019003355>
64. Carpentier FRD, Stoltze MF, Marcela R, Tailles LS, Camila C, Teresa C. Restricting child-directed ads bans is effective, but adding a time-based ban is better: evaluating a multi-phase regulation to protect children from unhealthy food marketing on television. *Int J Behav Nutr Phys Act* 20 (62):2023. <https://doi.org/10.1186/s12966-023-01454-w>
65. Alé-Chilet J, Moshary S. Beyond Consumer Switching- Supply Responses to Food Packaging and Advertising Regulations. *Marketing Science* 2023;41(2):243-270. <https://doi.org/10.1287/mksc.2021.1315>
66. Reyes M, Taillie LS, Popkin B, Kanter R, Vandevijvere S, Corvalan C. Changes in the amount of nutrient of packaged foods and beverages after the initial implementation of the Chilean Law of Food Labelling and Advertising: A nonexperimental prospective study. *Plos Med* 2020;17(7):e1003220. <https://doi.org/10.1371/journal.pmed.1003220>
67. Taillie LS, Bercholz M, Popkin B, Reyes M, Colchero MA, Corvalan C. Changes in food purchases after the Chilean policies on food labelling, marketing and sales in school: A before and after study. *Lancet Planet Health* 2021;5(8):e526-533. [https://doi.org/10.1016/S2542-5196\(21\)00172-8](https://doi.org/10.1016/S2542-5196(21)00172-8)
68. Taillie LS, Reyes M. Colchero MA, Popkin C, Corvalan C. An evaluation of Chile's law of food labelling and advertising on sugar-sweetened beverage purchases from 2015 to 2017: A before and after study. *PloS Med* 2020;17(2):e1003015. <https://doi.org/10.1371/journal.pmed.1003015>
69. Vandenbrink D, Pauzé E, Potvin Kent M. Strategies used by the Canadian food and beverage industry to influence food and nutrition policies. *Int J Behav Nutr Phys Act*, 2020;17(3). <https://doi.org/10.1186/s12966-019-0900-8>
70. Mulligan C, Jawad A, Potvin Kent M, Vanderlee L, L'Abbé MR. Stakeholder interactions with the federal government related to Bill S-228 and marketing to kids in Canada: A quantitative descriptive study. *CMAJ Open* 2021;9(1) E280-E287. <https://doi.org/10.9778/cmajo.20200086>