



Chronic Disease Prevention Alliance of Canada

Submission to SOCI regarding Bill S-228, An Act to amend the Food and Drugs Act (prohibiting food and beverage marketing directed at children)

June 13, 2017

Introduction

The Chronic Disease Prevention Alliance of Canada (CDPAC) is pleased to submit this brief to the Senate Standing Committee on Social Affairs, Science and Technology in support of Bill S-228, An Act to amend the Food and Drugs Act (prohibiting food and beverage marketing directed at children).

CDPAC (cdpac.ca) is an alliance of Canada's major national health organizations sharing a common vision for an integrated system of research, surveillance, policies, and programs for the promotion of healthy living for the prevention of chronic disease.

The causes of chronic diseases are complex and require a comprehensive approach spanning multiple government ministries, civil society and the private sector. In 2011, the UN General Assembly unanimously endorsed the Political Declaration on the Prevention and Control of Non-Communicable Diseases - mainly cardiovascular diseases, some cancers, diabetes and chronic respiratory diseases. These non-communicable diseases (NCDs), also commonly referred to as 'chronic diseases' are largely preventable and are predominantly caused by a common set of avoidable risk factors, most notably: tobacco use and exposure to second hand smoke; unhealthy diet; insufficient physical activity; unhealthy weights; harmful use of alcohol; and poverty.

In Canada, three out of five people over the age of twenty live with one of these preventable diseases, and four out of five are at risk.¹ Every year, over 150,000 Canadians die from them. Together, these preventable diseases account for 65% of all deaths in Canada.² As well as taking healthy years of life away from Canadians,³ they also exert a significant financial toll. In total, it is estimated that chronic diseases and other illnesses cost the Canadian economy \$190 billion annually, with \$122 billion in indirect income and productivity losses, and \$68 billion in direct health care costs. The direct cost of chronic diseases accounts for about 58% of the annual health care spending in our country.⁴ As well we know that the cost of diet-related disease in Canada in 2015 was estimated at \$26 billion/annum.

Bill S-228: CDPAC key recommendations

In light of the relationship between childhood obesity and chronic diseases,⁵ and taking into account the role that marketing plays in this relationship, CDPAC has supported the introduction of restrictions on marketing to kids since 2008, and CDPAC is a proud supporting partner on the Stop Marketing to Kids

¹ Public Health Agency of Canada. (2013). Preventing Chronic Disease Strategic Plan 2013-2016. Retrieved from http://publications.gc.ca/collections/collection_2014/aspc-phac/HP35-39-2013-eng.pdf. Accessed March 3, 2017.

² Vital statistics: Death database, CANSIM Table 102-0561. Retrieved from <http://www5.statcan.gc.ca/cansim/a05?lang=eng&id=1020561>.

³ Public Health Agency of Canada Steering Committee on Health-Adjusted Life Expectancy. Health-Adjusted Life Expectancy in Canada: 2012 Report by the Public Health Agency of Canada. Ottawa, Ontario: Public Health Agency of Canada; 2012.

⁴ Public Health Agency of Canada. Background: United Nations NCD Summit 2011 http://www.phac-aspc.gc.ca/media/nrrp/2011/2011_0919-bg-di-eng.php Accessed August 7, 2013.

⁵ Government of Canada. (2016). Childhood Obesity. Retrieved from: <https://www.canada.ca/en/public-health/services/childhood-obesity/childhood-obesity.html>.



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Coalition since its creation in 2014 and one of over 60 endorsers of the Ottawa Principles.⁶ The Ottawa Principles call for the restriction of commercial marketing of all food and beverages to children and youth age 16 and under with the exception of non-commercial marketing for public education.

CDPAC believes that:⁷

- in order to tackle the obesity epidemic among children, a comprehensive approach is required;
- an integral component of such an approach must address the marketing of unhealthy food and beverages to children;
- the current voluntary approach to the marketing of unhealthy food and beverages in Canada is insufficient, especially given the extent to which the chronic disease burden is exacerbated by obesity;
- addressing the marketing of unhealthy foods and beverages to children is best done via a regulatory regime, and we believe, per the Ottawa Principles, that the easiest most feasible way to do this is via restrictions on all food and beverage marketing to children.

Along with other members of the Stop Marketing to Kids coalition, CDPAC applauds Senator Nancy Greene Raine for introducing legislation prohibiting food and beverage marketing to children. Legislation that requires mandatory restrictions on M2Ks is critical as voluntary measures have been proven insufficient. Restrictions on marketing to kids is not a magic bullet to solve childhood obesity but it is one of the most effective weapons in a comprehensive strategy.

There is broad public support for restricting marketing to kids. Recent public opinion polling from Heart and Stroke's 2017 Report on the Health of Canadians *The kids are not alright. How the food and beverage industry is marketing our children and youth to death* highlights that 72% believe the food and beverage industry markets its products directly to children, 78% believe the food and beverages advertised to children are unhealthy and 70% feel that children are exposed to too much advertising by the food and beverage industry.⁸

CDPAC supports Bill S-228 in its current form and would like to highlight an opportunity to strengthen the legislation as well as two opportunities to make a strong commitment to robust legislation:

1. We recommend strengthening Bill S-228 by raising the age to 16 and under. This will protect our most vulnerable populations. 90% of food and beverage products marketed to kids and teens on TV and online are high in salt, fat or sugar.
2. CDPAC believes that "all food and beverages" approach as currently outlined in Bill S-228 and the Ottawa Principles is the most robust and cost-effective approach. If this approach is changed, CDPAC recommends the development and adoption of a robust nutrient profiling system based on public health best practices and informed by public health experts.
3. It is important to clearly define the types of marketing mediums that will be restricted. CDPAC requests a strong commitment to restrictions on a broad array of marketing mediums (this broad commitment must allow for the potential inclusion of mediums such as product packaging and digital spaces).

⁶ Ottawa Principles (January 2016): <http://stopmarketingtokids.ca/the-ottawa-principles-2/>

⁷ CDPAC. (2008). CDPAC Position Statement: Obesity and the Impact of Marketing on Children. Retrieved from: <http://www.cdpac.ca/media.php?mid=474>.

⁸ Heart & Stroke (2017). The kids are not alright. How the food and beverage industry is marketing our children and youth to death. 2017 Report on the Health of Canadians. Retrieved from: <http://www.heartandstroke.ca/-/media/pdf-files/canada/2017-heart-month/heartandstroke-reportonhealth2017.ashx>.



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Conclusion

Legislation means a fair fight for everyone: kids, parents and the food industry. Together, we envision a Canada where children and parents make nutritious food choices in an environment free of influence from food and beverage marketing to children. We trust that the breadth of the CDPAC membership's collective knowledge and insight reflects the importance and credibility of our recommendations. We would be pleased to provide further information and evidence underlying them.



Chronic Disease Prevention Alliance of Canada

The Chronic Disease Prevention Alliance of Canada (CDPAC) is a network of national health organizations that have come together around the common cause of promoting healthy living for chronic disease prevention.

Mission

Working primarily at the national level, CDPAC's mission is to take an integrated, population health approach to influence policies and practices that will help prevent chronic disease. CDPAC has two inter-related functions – advocacy and mobilizing knowledge for action.

Vision

Canadians will be supported by a comprehensive, sufficiently resourced, sustainable, and integrated system of research, surveillance, policies, and programs that promote health and prevent chronic disease.

Alliance Members

Alliance representatives provide strategic direction and oversight to CDPAC's shared priorities for action on chronic disease prevention. The Chair of the Alliance is Ms. Lisa Ashley, Canadian Nurses Association. The Past-Chair is Ms. Mary Collins, BC Healthy Living Alliance. The Alliance Members are:

- BC Healthy Living Alliance*
- Canadian Alliance on Mental Illness and Mental Health
- Canadian Cancer Society
- Canadian Medical Association
- Canadian Men's Health Foundation
- Canadian Nurses Association
- Diabetes Canada
- Dietitians of Canada
- Heart and Stroke Foundation of Canada
- The Kidney Foundation of Canada
- Ontario Chronic Disease Prevention Alliance*
- YMCA Canada

*Representatives of the CDPAC Network of Provincial/Territorial Alliances.