



Document 3

**RESULTS OF CONSULTATIONS FOR MARKETING OF UNHEALTHY FOOD
AND DRINKS TO CHILDREN AND YOUTH IN OTTAWA 2017**



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RESULTS OF CONSULTATIONS FOR MARKETING OF UNHEALTHY FOODS AND BEVERAGES TO CHILDREN AND YOUTH IN OTTAWA 2017

EXECUTIVE SUMMARY

As directed by the Ottawa Board of Health, Ottawa Public Health (OPH) staff completed a community consultation on reducing marketing of unhealthy food and drinks to children and youth at the municipal level. Unhealthy foods and drinks were defined as those that are high in sugar, salt, fat or calories. An official system for classifying food is to be developed by Health Canada. The main objective of OPH's consultation was to ensure that Ottawa residents, City of Ottawa departments and other interested parties had the opportunity to provide meaningful input on the potential for reducing marketing food and drinks to children through municipal actions.

During the consultation period of April 2017 to October 2017, over 1500 people participated through various methods: a bilingual on-line convenience survey; a randomized telephone survey with Ottawa residents; focus groups with school boards, childcare representatives and youth; webinars and focus groups with sports organizations, business and industry as well as meetings with representatives from City of Ottawa departments. Public consultations were promoted through the OPH website and social media platforms (twitter, Facebook), online advertisements (bloggers, electronic magazines, google and Facebook ads), media interviews, community events, as well as public service announcements and media releases on the City of Ottawa website.

Consultation with the public included a randomized telephone survey and online survey. The telephone survey estimated that the 85% of the Ottawa population aged 18 years and over agreed that food and beverage marketing targets children and youth with marketing and 90% agreed that it affects their food choices. Nearly 3 in 4 (70%) felt that marketing of food and drinks directed at children and youth are mostly for products that are unhealthy. Over 80% felt that the marketing of unhealthy food and drinks:

- Can contribute to health problems in children and youth, or cause health problems later when they are adults,



- Make children and youth consume more unhealthy food and drinks or make it seem like choosing unhealthy food and drinks is the typical thing to do,
- Establishes lifelong patterns of choosing unhealthy food and drinks in adulthood or
- Makes it harder for parents and guardians to get their children and youth to make healthy food and drink choices.

Over 80% of the Ottawa population aged 18 and over who responded to the online survey supported restricting the marketing of unhealthy food and drinks in child care centres or schools with just over 70% supporting the restriction of marketing in other venues. Over 80% also felt that marketing should be limited near childcare centres and schools with support ranging from just over 60% to 70% for other venues.

Over 1000 people responded to the online public survey. The findings of the online survey were consistent with the findings of the telephone survey.

Consultations with representatives (n=9) from all four Ottawa school boards showed that schools are highly engaged in providing safe supportive environments to students. School boards have existing policies that restrict advertising, sponsorship, naming rights, and branded materials. Suggested improvements to the food environment in schools included enhancing the quality of food at school events, reviewing social media platforms and screening for unintentional ads/ block ads, enhancing modelling of the Policy/Program Memorandum No. 150 (PPM 150; nutrition standards for food and beverages sold in publicly funded elementary and secondary schools in Ontario) and strengthening food literacy of students.

Consultations with participants representing childcare groups (n=45), revealed food and drinks were not overtly marketed in childcare centres. Signage or vending machines are not typically present and some existing policies are in place to address this issue. Ideas for future action included childcare settings developing strategies to limit less traditional forms of marketing. Respondents provided opportunities for future action on reducing or restricting marketing of food and drinks to children in childcare settings. Suggestions included consulting with the Ministry of Education for the addition of specific regulations in the Childcare and Early Years Act to address 1) restricting



marketing of foods and beverages in early childhood settings, 2) specific guidance on what is to be served in childcare settings to ensure a healthy eating environment.

The majority of the 27 Ottawa youth, who self-selected to participate in 1 of 5 focus groups agreed that marketing of unhealthy food and drinks to children and youth is an issue that concerns them. The most popular strategy that youth recommended to address this issue was increasing access and availability of healthy foods. There was also discussion about restricting marketing and sales of unhealthy foods and beverages on municipal property and in schools as well as providing nutrition education in schools and in the community.

Focus group participation from business/food industry and sports associations was extremely limited, with 11 participants. Respondents who attended voiced some support for municipal level restrictions on direct advertising of food and drinks to children and youth, however, they also raised concern about how to define “unhealthy food and drinks.” The most common concern raised related to restrictions on brand marketing and sponsorship opportunities. While there was support for ensuring healthy options are available, there was little or no support for the removal of unhealthy food and drinks as an offering on municipal properties. Individual meetings with sports associations in Ottawa revealed further support for increasing access to and providing education to children regarding healthy foods/drinks, while revenue loss was, again, identified as a barrier to reducing M2CY at sporting events.

City of Ottawa departments identified potential opportunities to impact the M2CY in municipal settings that can be generally categorized into three themes; policy changes, education/awareness raising and increasing access to healthy food with the main challenge being a potential loss of revenue from food/beverage industry advertising.

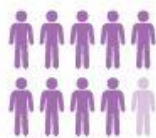
OPH consultations covered all areas stipulated in the Board of Health’s motion, including public consultation, as well as targeted stakeholder consultation. Next steps will be to share findings with stakeholders in Ottawa to explore feasible options to reduce the marketing of unhealthy food and drinks in a municipal context.

FOOD & DRINKS

Marketing to Children and Youth in Ottawa

What we heard from Ottawa residents in our randomized phone survey

The food and drink industry targets children and youth



9 in 10
agree that children and youth are targeted



3 in 4
agree that it is mostly for products that are unhealthy

Marketing influences children and youth's food and drink choices



9 in 10
agree that it affects their food and drink choices and makes them consume more unhealthy options



3 in 4
agree that it affects what they ask their parents or guardians to buy

Marketing impacts their health



9 in 10
agree that it can cause health problems such as obesity in children and youth, or cause health problems later when they are adults

Marketing of food and drinks targets children and youth all day long.

Marketing is any message that advertises or promotes a product or service.

SOPHIA'S Day

What Ottawa residents said about marketing of unhealthy food and drinks in our city



Child Care Centres & Schools:

- 1 in 3** have seen marketing in schools
- 1 in 10** have seen marketing in child care centres
- 8 in 10** support putting limits on marketing in child care centres and in schools
- 9 in 10** support decreasing the availability of unhealthy food and drinks in child care centres and schools



Public Libraries & Recreation Centres:

- 1 in 3** have seen marketing at public libraries and recreation centres
- 7 in 10** support putting limits on the marketing in public libraries and recreation centres
- 8 in 10** support decreasing the availability of unhealthy food and drinks in public libraries or recreation centres



Other City Properties:

- 4 in 10** have seen marketing at beaches, parks, playgrounds, recreational playing fields and on public transit
- 7 in 10** have seen marketing at special events like festivals and sports events on city property
- 7 in 10** support putting limits on marketing on city property



Background

In February 2017, the Heart and Stroke Foundation released its report titled “Report on Health of Canadians – The Kids Are Not Alright”, which examines how industry is marketing unhealthy food and drinks directly to children and youth and how this affects their food preferences and choices, and their health. The report includes a list of recommended actions for municipal governments.

At the Ottawa Board of Health (BOH) meeting of April 3, 2017, Ottawa Public Health (OPH) staff presented a series of recommendations to the BOH members that related to restrictions in the marketing of foods and beverages. At this meeting, a number of delegates presented to the BOH members in support of these recommendations. These delegates included; Manuel Arango (Heart and Stroke Foundation), Marie Christine Monchalin (Canadian Cancer Society), Dr. Monique Potvin-Kent (University of Ottawa), Margaret Hughes & Carolyn Mondoux (Dietitians of Canada), Alexandra Dubois (Ottawa Food Policy Council), Bill Jeffery (Council on Public Health and Law), Alex Munter (CHEO) and Jim Sheperd (advocate against energy drinks).

At the meeting of April 3, 2017, the BOH approved the recommendation that OPH staff complete a community consultation on marketing of unhealthy food and drinks to children and youth at the municipal level. The main objective of OPH’s consultation was to ensure that Ottawa residents, City of Ottawa departments and other interested parties have the opportunity to provide meaningful input on the potential for reducing marketing unhealthy food and drinks to children through municipal actions.

OPH conducted consultations from April 2017 to October 2017 and aimed to reach interested parties through on-line convenience mediums (webinar, survey), in-person focus groups and a randomized phone survey. A bilingual survey was created and housed at www.haveyoursayottawa.ca. An external company was contracted to conduct randomized telephone surveys with Ottawa residents.

A communication strategy was implemented; both paid and earned media, to encourage responses to the on-line survey and participation in various aspects of the consultation on OPH’s website. A list of community contacts, schools, childcare centres, city departments, sports associations, businesses and industry was compiled and



stakeholders were contacted via email or phone and invited to provide input through in-person, on-line survey or telephone consult during this timeframe. Feedback was also provided to OPH through the use of the m2cy@ottawa.ca email address.

RESULTS OF THE CONSULTATIONS

Random Telephone Survey

From October 16 to October 20, 2017, an external company conducted a random household, telephone survey on the marketing of unhealthy food and drinks to children with 405 residents of Ottawa, including 125 parents with children living in the home, to estimate the Ottawa population's opinions amongst people aged 18 and over. The margin of error associated with the total sample is +/- 4.9%, at a 95% confidence interval.

Marketing of unhealthy food and drink

Results indicated 90% of the Ottawa population aged 18 and over either somewhat or strongly agreed that the marketing of food and drinks to children and youth affects their choices. Eighty-five per cent also agreed that food and beverage companies specifically target children and youth when marketing. These attitudes continue with just over three-quarters (78%) agreeing that the marketing of food and drinks to children and youth affects what parents or guardians buy. With unhealthy food and drinks described as those that are high in fat, sugar, salt and calories, 73% of Ottawa residents surveyed indicated that the marketing of food and drinks directed at children and youth are mostly for products that are considered "unhealthy".

Ottawa residents predominantly (89%) agreed that the marketing of unhealthy food and drinks likely affects children and youth (i.e. by contributing to health problems such as obesity, or contributing to health problems later when they are adults). Eighty-three percent agreed that marketing of these products establishes lifelong patterns of choosing unhealthy food and drinks in adulthood, or makes it harder for parents and guardians to get their children and youth to make healthy food and drink choices (82%).

Residents had most commonly noticed marketing of unhealthy food and drinks aimed at children and youth at special events like festivals and sports events on city property (70%). Less than half had seen marketing of unhealthy food and drinks at beaches,



parks, playgrounds and recreational playing fields (44%) or on public transit (42%). Roughly one-third of residents had noticed marketing at public libraries or recreation centres (35%) or at schools (30%). Thirteen percent had noticed marketing at other city buildings such as City Hall and municipal offices and 7% in childcare centres and agencies.

Ottawa residents indicated that settings children frequent daily are of most concern, in terms of putting limits on marketing of unhealthy food and drinks to children and youth. Eighty-three percent supported limiting marketing in childcare centres and schools. Likewise, a similar proportion supported limits on the placement of billboards and signs advertising unhealthy food and drinks near schools (80%) and childcare centres (79%).

Availability of unhealthy food and drink

Nearly 9 in 10 supported decreasing the availability of unhealthy food and drinks to children and youth in childcare centres (88%) and schools (87%). This support lessened in areas of recreation, where roughly two-thirds supported decreasing the availability of unhealthy food and drinks in locations such as beaches, parks, playgrounds, and at special events like festivals and sports events on city property. Overall, most respondents were supportive of city facilities only selling healthy food and drinks with 79% either somewhat or strongly supporting the idea.

See appendix A for more details about the methodology and results of the random telephone survey.

On-line Consultation

A bilingual, convenience on-line survey was open to the public from June 13 to September 22, 2017. This survey asked for individuals, businesses and organizations opinions about marketing of unhealthy food and drinks to children and youth. It also asked their thoughts on access to these products by children and youth. Feedback was collected from people aged 16 years and over who live, work or go to school in Ottawa. Over 1000 responses were received. As a non-random sample, results can only be interpreted as the views of those who responded, not as a reliable estimate of the views of the population in Ottawa.



Marketing of unhealthy food and drink

Eighty three percent of respondents agreed or strongly agreed marketing of food and drinks targets children and youth. Respondents also agreed that marketing to children affects the food choices children and youth make (86%). Respondents agreed that marketing to children influences parent purchases (76%). Eighty-three percent of respondents felt that most of the marketing directed at children was for food and drink that was defined as unhealthy.

When asked about the effects of marketing to children, 87% of respondents thought it likely that marketing would increase the amount of unhealthy food and beverage children consumed, 85% felt it normalized the consumption of unhealthy food, and 81% felt it would make it more difficult for parents/guardians to get children to make healthy food and beverage choices. Eighty four percent of respondents agreed marketing to children likely affects health problems in children and youth or later in adulthood.

Respondents observed marketing at the following venues; recreation centers (79%), events (78%), transit (70%), or schools (59%).

Respondents' level of support for restricting marketing to children by setting was strongest for childcare centres (82%) and schools (82%). Respondents' support was strongest for limiting marketing close to schools (78%) and childcare centres (75%).

Availability of unhealthy food and drink

Overall, 79% of respondents felt that limiting access to unhealthy food improved food and beverage choices made by children.

Forty one percent of respondents provided additional comments about marketing of unhealthy food and drink to children and youth. Twenty percent of respondents provided comments that were not about the city/OPH's involvement in marketing. Instead, they focussed on other areas such as increasing physical activity, but did not state whether this was action that should be taken instead or in addition to other actions relating to marketing unhealthy food and drinks to children and youth. Eleven percent of respondents provided additional comments that were supportive of restricting marketing of unhealthy food and drink to children and youth. Several respondents identified physical activity, screen-time, and parental social factors (i.e. financial constraints) as



factors that also needed to be addressed. Another theme that emerged was support for limiting marketing in areas that cater only to children, such as childcare centres. Ten percent of respondents provided strong negative opinions. In this group, a large portion felt this topic was outside the responsibility of public health or contravened freedom of choice. Several comments stated that any intervention would be less cost-effective than other areas of intervention (e.g. education on nutrition) or that marketing was too extensive/pervasive to influence and that any investment in this area would not be cost effective.

Consultations with Schools and School Boards

OPH representatives had an initial discussion with each school board's (Ottawa Carleton District School Board, Ottawa Catholic School Board, Conseil des écoles publiques de l'Est de l'Ontario, Conseil des écoles catholiques du Centre-Est) associate directors in June 2017 to discuss the issue of marketing to children and youth in the school context. Additionally, school boards shared existing policies and guidelines that would apply to marketing. OPH's school health Public Health Nurses discussed marketing to children and youth through their annual meetings with school principals and/or vice principals. The information collected through these methods was presented at a focus group with nine representatives from the four school boards in Ottawa with the objective to explore restricting marketing to children and youth of unhealthy food and drink and to identify potential actions.

The focus group included a presentation outlining the current context and preliminary feedback gathered by the School Health Nurses at the school level. A discussion followed, which was facilitated by an external independent facilitator. The style was intended to be participatory and to allow for divergent innovative discussion.

The focus group results showed that schools are highly engaged in providing safe supportive environments to students. Efforts to include healthy eating as part of mental and physical health are in place. There is acknowledgement that PPM 150 has improved the food offerings in the schools. School boards have existing policies that restrict advertising, sponsorship, naming rights, and branded materials. Further, schools are controlled environments where principal approval is required for all materials coming



into the school. This gatekeeping function protects children and youth from direct advertising, and use of incentives.

There was consensus that there is room for improvement within schools. A number of activities were identified to reduce marketing to children and youth and/or reduce the influence of marketing included:

- Enhance modelling of PPM 150: It was noted that PPM 150 exempt days are treated as celebrations; teachers may unintentionally expose children to marketing through packaging on pizza boxes, etc. Most teachers would not recognize or act if PPM 150 breaches occur (an individual teacher who has a particular passion or the principal is the most likely to respond).
- Strengthen food literacy education: This could be included in student activities/clubs, especially breakfast initiatives
- Integrate nutrition information in mental health and environmental initiatives
- Increase appeal and quality of food services to increase consumption of healthy foods and drinks at school- suggestions of a cafeteria tour of various providers- learning from Europe or from local providers who are doing well with sales; leverage RFP process
- Revisit commissions with food service providers
- Improve quality of food at school events - currently using pizza as is convenient and inexpensive.
- Review social media platforms and screen for ads for unhealthy food and drinks/ block ads.

Consultations with Childcare Representatives

Four consultation activities took place with childcare representatives in June 2017; two face-to-face meetings with Early Childhood Educator Community of Practice groups, and two key informant interviews by telephone. The two childcare community of practice groups included Early Childhood Educators and childcare staff, and two larger childcare



agencies representing 10 childcare centres, over 50 licensed home childcares, one Ottawa Early Year Centre and three nursery school programs.

Each consultation consisted of:

1. A synopsis of the issue (e.g. what is marketing with examples, why OPH is holding this consultation, review of how information gathered will be used).
2. A review of the confidentiality of responses statement.
3. A discussion of the issue of marketing to children.
4. Information and process for follow-up with OPH staff, should groups choose; and
5. Promotion of the online survey.

Results from consultation with childcare representatives revealed that food and drinks were not overtly marketed in childcare centres. No signage or vending machines are typically present. Existing policies include: no juice served policy, 'Healthy celebrations' policies, zero screen time policies to limit exposure to marketing, and investment policies that restrict child cares from holding financial investments in businesses representing 'unhealthy' food and drink choices.

Childcare providers expressed concern that children are aware of and request unhealthy foods at a young age and the childcare providers questioned the role of parents in limiting exposure to unhealthy food and drinks.

- Multiple early child educators reported instances of children requesting fast food related themes in play areas (i.e. playing fast food drive thru).
- Educators reported that many families regularly provide children with fast food or 'processed foods'.
- Educators reported requests from parents for use of unhealthy edible rewards for behaviour reinforcement (e.g. during toilet training).
- Educators reported that, in childcare settings where children bring foods from home, some children experience peer pressure and scrutiny from others if they



bring healthy foods; unhealthy foods are seen as acceptable and healthy foods can be cause for ridicule.

Childcare representatives generated ideas for future action in the area of marketing of unhealthy foods and beverages to children and youth in the following three categories:

1. Parental education and awareness

Share information and tools with parents to support healthier choices and food education, including media awareness, at home.

2. Further reduce exposure to marketing of unhealthy foods and drinks at childcare settings

Develop strategies to limit less traditional forms of marketing.

3. Provincial Policies

Currently, there are no provincial regulations that provide guidance on reducing or restricting marketing of foods and beverages to children in childcare settings. It was recommended that amendments to the *Child Care and Early Years Act* could address: 1) restricting marketing of foods and beverages in early childhood settings, and 2) specific guidance on what is to be served in childcare settings to ensure a healthy eating environment.

Consultations with Youth

Twenty-seven children and youth were also consulted to obtain their perspective on marketing of unhealthy food and drinks as this issue affects them directly. Five focus groups for youth (age 12-19) were planned in September and October 2017 including four at local library branches and one at Michele Heights Community Centre. Youth participants were recruited through social media and through established communication channels used for community groups, clubs etc. Flyers used for recruitment offered incentives for participating in the form of community involvement hours (for high school students) and free healthy food at the focus group. There was a lack of French representation as the French focus group was cancelled due to low registration (n=0).



The focus groups were 2 hours in length and were facilitated by one OPH staff member. Participants were orientated to the topic of Marketing to Children and Youth (M2CY) by use of a mockumentary video from the Heart and Stroke Foundation. This was followed by an activity where groups created their own food and beverage advertisement to be marketed to children and youth. These activities prepared the youth to participate in a facilitated discussion on the issue.

Results of the qualitative focus groups indicated the majority of participating Ottawa youth in the focus groups agreed that marketing of unhealthy food and drinks is an issue that concerns them. The most popular strategy that youth recommended to address this issue was increasing access and availability of healthy foods. There was also discussion about restricting marketing and sales of unhealthy foods and beverages on municipal property and in schools as well as nutrition education in schools and in the community. With limited youth participation overall, these results cannot be taken as representative of youth at large.

Consultations with Sports Associations and Business/Industry

Consultations with the business and food industry as well as with child and youth focused sports and recreation groups included in-person and videoconference focus groups in June and July 2017. Thirty-five business and food industry representatives, 19 BIA representatives, and 60 sports/recreational representatives were invited to participate in the focus groups. The focus groups were advertised through the City web site, a public service announcement, on Eventbrite, and through OPH and Ottawa Sport Council social media. A total of 5 representatives from the business/ food industry, 1 from the sports/ recreation sector and 2 community participants with no declared affiliations ended up participating in these focus groups.

Based on feedback from the initial focus groups, further efforts were made to engage these stakeholder groups by outreach to the Ottawa Council of Business Improvement Areas (OCOBIA) meeting in August and September 2017, additional promotion through the Ottawa Sport Council and added videoconferences during September. These activities engaged 3 individuals in the recreation/ sport sector; however, were unsuccessful in further engaging the business community.



Overall the participants voiced some support to municipal level restrictions on direct advertising of unhealthy food and drinks to children and youth. However, the participants outlined the challenge of defining “unhealthy food and drinks.” The most commonly raised concern related to restrictions on brand marketing and sponsorship opportunities. This was expressed by participants from the sports/recreational and business/food industry sectors. While there was support for ensuring healthy options are available, there was little or no support for the removal of unhealthy food and drinks as an offering at municipal properties.

In addition to the focus groups, OPH representatives held a series of meetings in July and August, 2017, with individual Ottawa sports associations including the Ottawa Sports and Entertainment Group, the Ottawa Senators, and the Ottawa Champions to discuss the issue of marketing unhealthy food and beverages at sporting events. These meetings revealed potential opportunities to impact the marketing of unhealthy food and beverages at sporting events that can be generally categorized into three themes; policy changes (i.e. allowing water bottles to be brought into events and filled once inside), education/awareness raising (i.e. providing children’s programming on marketing and healthy eating) and increasing access to healthy food (i.e. providing more nutritious options for children). The biggest barrier mentioned at these meetings in regards to marketing unhealthy food and drinks to children was a potential in loss of revenue that sports associations receive from advertising and sports sponsorship.

OPH also received correspondence through the m2cy@ottawa.ca email address from some businesses and industry representatives. All parties requested to be involved in OPH’s consultation process as stakeholders and will be involved moving forward in discussions related to changes in policies that affect marketing of unhealthy foods and beverages in Ottawa.

Consultations with City Departments

OPH representatives held a series of meetings from May to September 2017 with City of Ottawa departments including; Planning, Infrastructure, and Economic Development, Recreation, Cultural and Facility Services, Transportation Services, Community and Social Services Department and Ottawa Public Library to discuss the issue of marketing to children and youth on municipal property.



These meetings revealed potential opportunities to impact the marketing of unhealthy food and drinks in municipal settings that can be generally categorized into three themes; policy changes, education/awareness raising and increasing access to healthy food. The main challenge voiced in reducing marketing of unhealthy food and drink included a potential in loss of revenue that would occur if there were changes to existing policies (i.e. pouring rights, vending/sales).

CONCLUSION

OPH completed a consultation process to solicit input from several stakeholders on the marketing of unhealthy foods and beverages to children and youth in Ottawa. Consultations obtained over 1500 responses from on-line, telephone and in-person consultations.

The on-line survey and telephone survey consultations both revealed that the public agreed food and beverage marketing targets children and youth, affects their food choices, is for food and drinks that are mostly unhealthy and influences parent purchases. The majority of those consulted agreed that marketing increases the amount of unhealthy food and drinks children consume, normalizes the consumption of unhealthy food and drinks, makes it more difficult for parents/guardians to get children to make healthy food and drink choices and that it could contribute to health problems for children now and/or in their future. The strongest support noted for restrictions to marketing were in and around schools and childcare settings. These results correspond with results of the randomly sampled telephone survey of Ottawa residents.

School and childcare stakeholders who attended focus groups indicated that there are already a number of measures in place to protect children from food and beverage marketing but noted areas for future action that should be explored through continuing discussions and consultation including with local school boards and the Ministry of Education.

Ottawa youth who participated in the focus group agreed food and beverage marketing was an issue that concerned them. Suggested strategies to address the issue included increasing access to healthy foods and beverages.



Though participation from business/industry and sports association was limited, there appears to be some support for municipal level restrictions on direct advertising of unhealthy food and drinks to children and youth. The most commonly raised concern related to proposed restrictions to brand marketing and sponsorship opportunities. While there was support for ensuring healthy options are available, there was little or no support for the removal of unhealthy food and drinks as an offering at municipal properties. Further consultation with these sectors is required to gain a deeper understanding of their perspectives on this issue. Collaboration with intermediary stakeholders and careful consideration of timing may be required to support more representative feedback and engage meaningful collaborations from the business sector. As well, scenario based discussion may better engage businesses to identify sector-specific barriers, opportunities and mitigation activities.

Continued collaboration with City of Ottawa departments will be important in moving forward with a plan to address the identified opportunities in the areas of policy change, education/awareness raising and increasing access to healthy food and drinks in municipal settings.



Appendix A: Detailed Analysis of the Random Telephone Survey

A telephone survey was administered involving 405 Ottawa residents on the marketing of unhealthy foods and drinks to children, including 125 parents of children living in the household. The data was collected using a random household, telephone survey with residents of the City of Ottawa. The margin of error associated with the total sample is +/- 4.9%, at a 95% confidence interval.

The survey was developed using the online questionnaire administered by Ottawa Public Health in 'Have Your Say'. The questionnaire was adapted for telephone administration and refined based on review by both EKOS and Ottawa Public Health, and learnings acquired through the online survey. The survey was programmed for administration in both English and French (the survey was developed in English, with French translation provided by Ottawa Public Health). Respondents could complete the survey in their official language of choice. The questionnaire contained roughly 50 survey questions (including two open end questions) and took an average of 13.2 minutes to complete.

The sample approach involved random digit dial to ensure the inclusion of both listed and unlisted landline telephone numbers within the City of Ottawa. This was augmented through a sample containing cell phone only households based on rates within the city.

The questionnaire was first pretested by telephone with 15 participants on October 11 and 12, 2017. The test included a review of the results and audit of interview recordings to monitor proper comprehension by the respondents and accurate data collection. The survey was in field from October 16 to October 20, 2017.

Survey results were weighted by age, gender, and region, to be aligned with the distribution of the 2016 Census. Open ended responses were reviewed and coded, and banner tables were created to explore results by key characteristics (e.g., region, age, gender, education, and income).

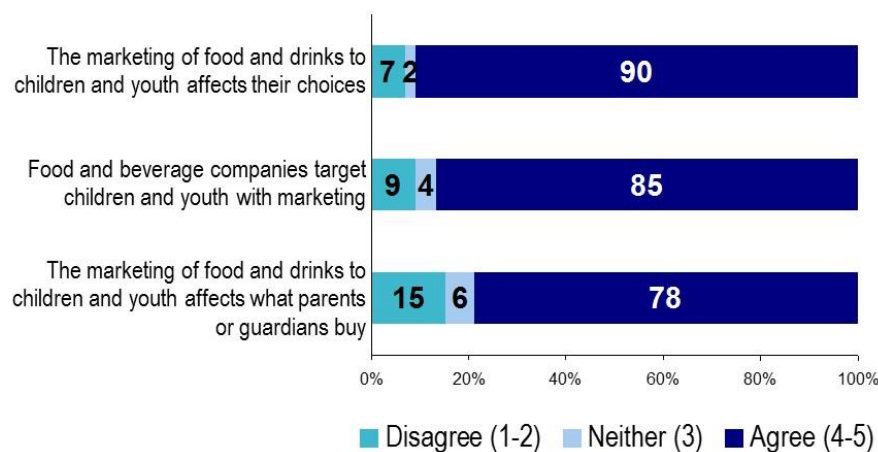
Marketing Attitudes

Ottawa residents surveyed were asked whether they agreed or disagreed with several statements regarding the marketing of food and drinks to children and youth. Nine in ten



(90%) either somewhat or strongly agreed that the marketing of food and drinks to children and youth affects their choices. Most (85%) also agreed that food and beverage companies target children and youth when marketing. Just over three-quarters (78%) agreed that the marketing of food and drinks to children and youth affects what parents or guardians buy; 15% disagreed.

“To what extent do you agree or disagree with the following statements about marketing of food and drinks to children?”



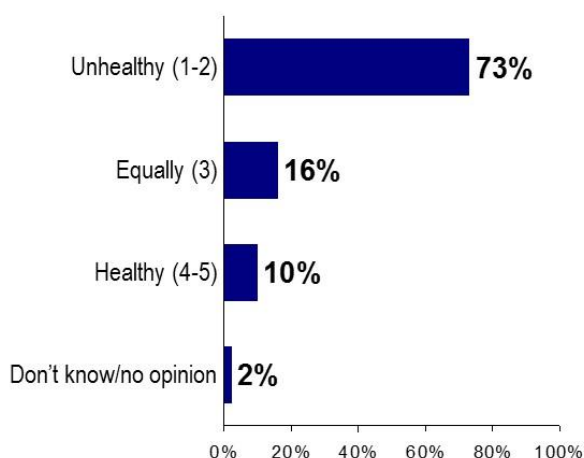
- Ottawa residents in the south end were more likely than those in other areas to disagree that beverage companies target children and youth with marketing and that the marketing of food and drinks to children and youth affects their choices.
- Those born in Canada were more apt to agree that food and beverage companies target children and youth with marketing.
- Ottawa residents with household income over \$100K were less apt to agree that the marketing affects what parents or guardians buy.



Marketing to Children and Youth

A description of unhealthy food and drinks was provided to respondents: those that are high in sugar, salt, fat or calories. Nearly three in four (73%) Ottawa residents surveyed feel that the marketing of food and drinks directed at children and youth are mostly for products that are unhealthy. Sixteen per cent indicated that food and drinks are marketed equally between those that are healthy and unhealthy. One in ten (10%) said that the marketing of food and drinks directed to children and youth is mostly for products that are healthy.

“Unhealthy food and drinks are considered those that are high in sugar, salt, fat or calories. Is the marketing of food and drinks directed at children and youth mostly for products that are...?”



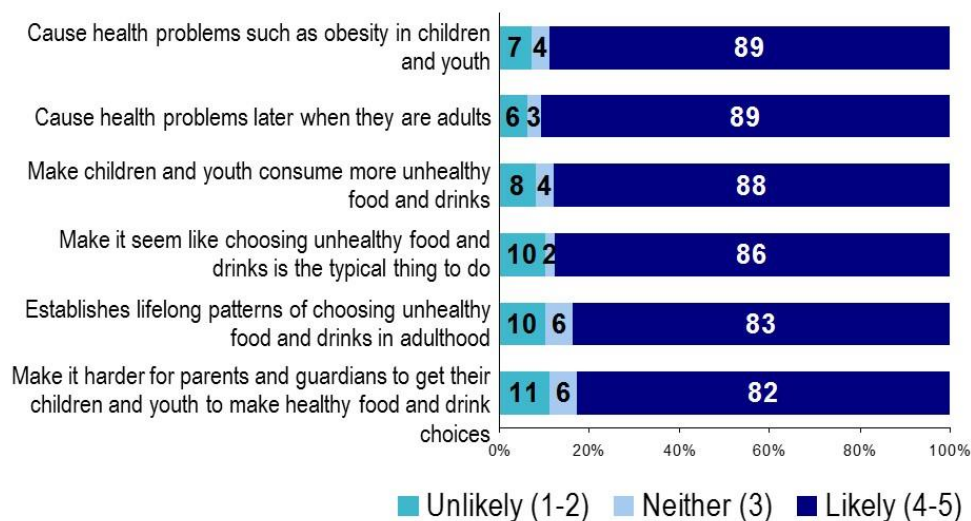
- Residents in central Ottawa were more apt to say that the marketing is mostly for unhealthy products, while those in Nepean were more likely than other Ottawa residents to feel the marketing is mostly for healthy products.

- Those with less education (high school or less) or income (under \$60K), along with households with no children, were more apt to say that the marketing of food and drinks is mostly for products that are healthy.

Effects of Marketing

Ottawa residents perceived that the marketing of unhealthy food and drinks affect children and youth in a variety of ways. Nearly nine in ten (89%) felt that the marketing of unhealthy food and drinks can contribute to health problems such as obesity in children and youth, or contribute to health problems later when they are adults. Most believed that the marketing of these products make children and youth consume more unhealthy food and drinks (88%), or make it seem like choosing unhealthy food and drinks is the typical thing to do (86%). Just over 8 in 10 said that marketing of these products establishes lifelong patterns of choosing unhealthy food and drinks in adulthood (83%), or makes it harder for parents and guardians to get their children and youth to make healthy food and drink choices (82%).

“How likely is it that the marketing of unhealthy food and drinks can affect the following in children and youth?”





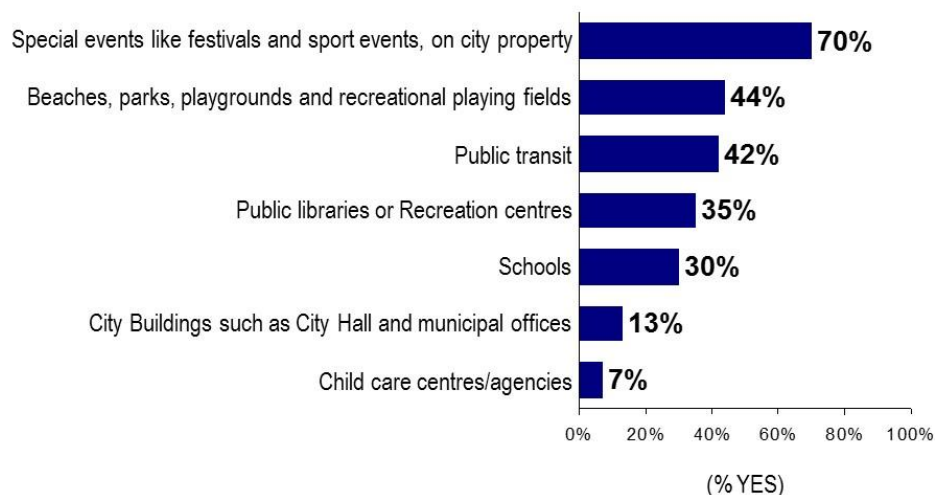
- Ottawa residents with income under \$100K were more apt than those with higher income to say each statement is likely.
- Those living in central Ottawa were more likely than other residents to say it is likely that marketing makes children and youth consume more unhealthy food and drinks, or causes healthy problems such as obesity.
- Older residents (age 65+), along with those without children in the household, were more likely to say that marketing makes it harder for parents to get their children to make healthy choices.

Location of Marketing

Residents had noticed marketing of unhealthy food and drinks aimed at children and youth throughout Ottawa. Most notably, 7 in 10 (70%) had seen marketing at special events like festivals and sports events on city property. Less than half had seen marketing of unhealthy food and drinks at beaches, parks, playgrounds and recreational playing fields (44%) or on public transit (42%). Roughly one-third of residents had noticed the marketing at public libraries or recreation centres (35%) or at schools (30%). Other city buildings such as City Hall and municipal offices contain marketing towards unhealthy food and drinks, according to 13% of respondents. Seven per cent said they had seen this marketing in childcare centres and agencies.



“For each of the following areas, have you seen marketing of unhealthy food and drinks aimed at children and youth?”



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n=405

Ottawa Public Health survey, 2017

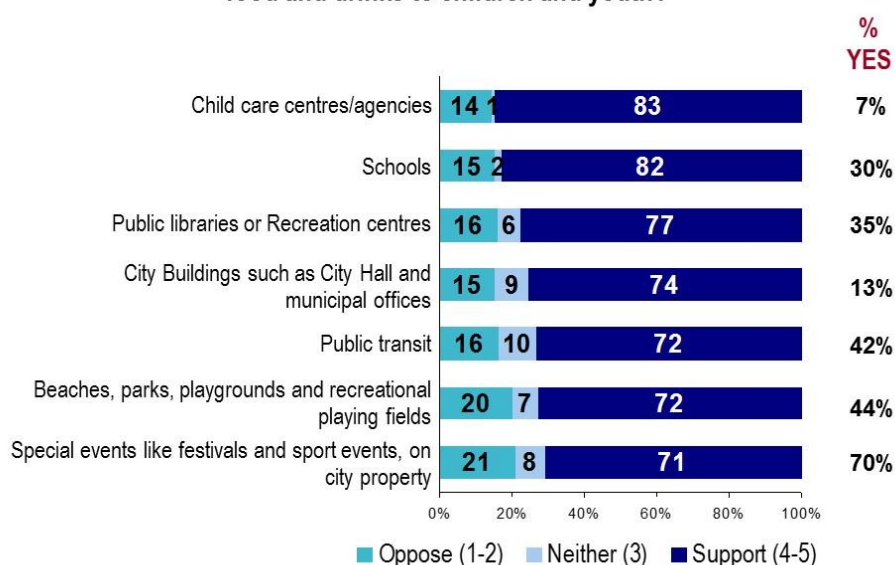
- Residents with less education (high school or less) or income (under \$60K) were more likely to say they noticed marketing in all locations, with the exception of special events like festivals or sport events.
- Those in the east end were much more likely (21%) to have seen marketing of unhealthy food and drink in childcare agencies (compared to average of 7%).
- Residents age 35-44 were more apt to have seen marketing on public transit (72% compared to the average of 42%).
- Ottawa residents with children in the household were **less** likely to say they have seen marketing aimed at children and youth at beaches, parks, playgrounds and recreational playing fields.

- Those living in the south end were more likely than residents from other areas to have seen marketing in schools and least likely to have noticed marketing at beaches, parks, playgrounds and recreational playing fields.
- Older residents (65+) were less likely to have seen marketing at special events like festivals and sports events.

Supports for Limits

Although only 7% of Ottawa residents had seen the marketing of unhealthy food and drinks directed at children and youth at childcare centres, eight in ten (83%) respondents somewhat or strongly supported putting limits on marketing in childcare centres generally. A similar proportion (82%) supported putting limits on marketing in schools. Roughly 7 in 10 supported putting limits on the marketing of unhealthy food and drinks in the remainder of locations, including; public libraries or recreation centres (77%), city buildings such as City Hall or municipal offices (74%), public transit (72%), beaches, parks playgrounds and recreational playing fields (72%), or special events like festivals or sports events when on city property (71%).

“What is your level of support for putting limits on the marketing of unhealthy food and drinks to children and youth?”

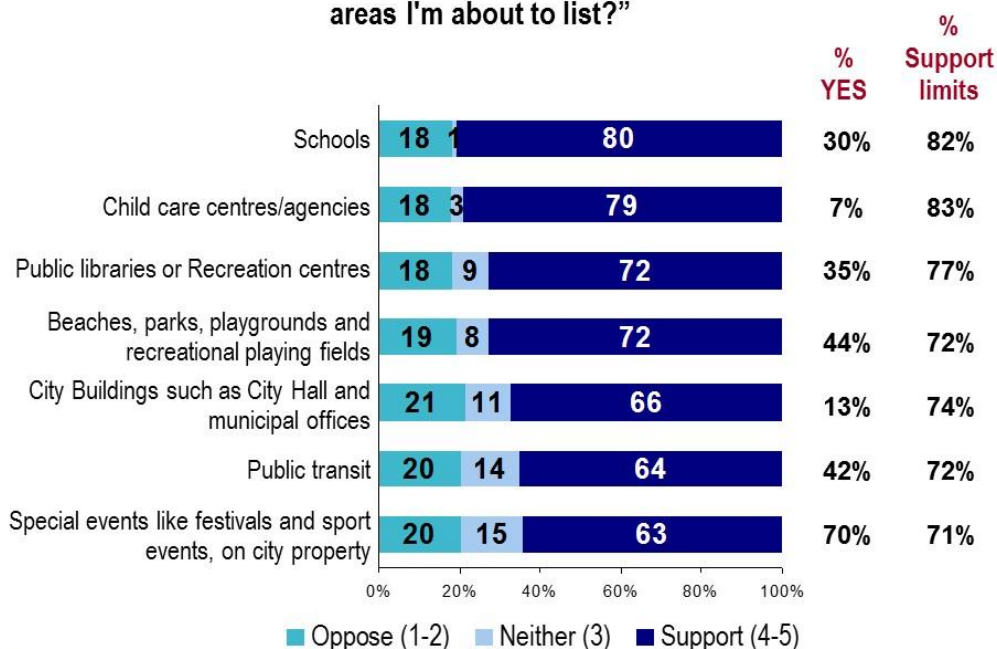


- Ottawa residents with lower income (under \$60K), respondents living in central Ottawa, and households with no children living at home were all more likely to support putting limits on marketing in most locations.

Limits on Advertising

As noted, 8 in 10 respondents supported putting limits on marketing generally in childcare centres and schools. A similar proportion likewise supported putting limitations specifically on the placement of bill boards and signs advertising unhealthy food and drinks near schools (80%) and childcare centres (79%). Just over 7 in 10 felt there should be limitations on the placements of bill boards and signs near other locations frequented by children and youth: public libraries or recreation centres (72%), or beaches, parks, playgrounds and recreational playing fields (72%). About two-thirds supported limits on adverting unhealthy food and drinks near city buildings such as City Hall and municipal offices (66%), public transit (64%), or special events like festivals and sport events on city property (63%).

“And what is your level of support for limitations on the placement of bill boards and signs advertising unhealthy food and drinks near the following areas I’m about to list?”





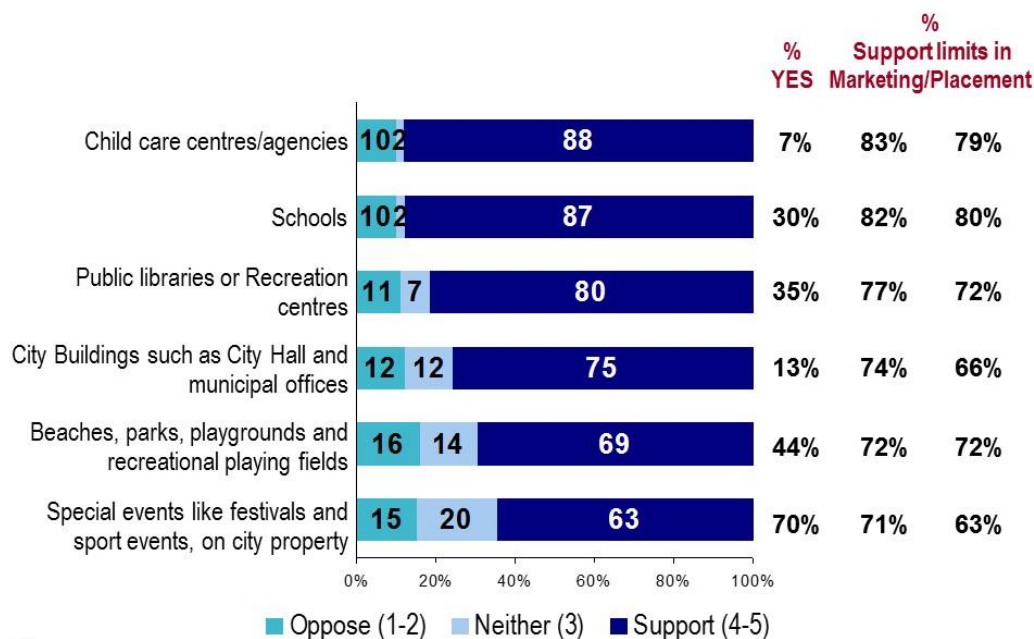
- Ottawa residents born in Canada were more apt to support putting limitations on advertising near schools.
- Households without children were more likely to support putting limitations on advertising near schools, public transit, or at special events.
- Those with high school education or less were more apt to oppose putting limitations on advertising near schools, public libraries or recreation centres, city buildings, or special events on city property.
- Residents who speak French at home were more likely to support limitations near city buildings.

Limits on Availability

Childcare centres and schools are again the locations in which Ottawa residents were least concerned about placing limitations on unhealthy food and drinks. Nearly 9 in 10 supported decreasing the availability of unhealthy food and drinks in childcare centres (88%) and schools (87%). Eight in ten (80%) supported decreasing the availability of food and drinks in public libraries or recreation centres. Three-quarters (75%) supported decreasing the availability in city buildings such as City Hall and municipal offices. Roughly two-thirds supported decreasing the availability of unhealthy food and drinks to children and youth in beaches, parks, playground and recreational playing fields (69%) or at special events like festivals and sports events on city property (63%).



“Finally, for each location I'm about to list, what is your level of support for decreasing the availability of unhealthy food and drinks to children and youth?”



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- Residents in the east end were more likely to support decreasing the availability in childcare centres. Those in the south end were more apt to oppose.
- Those in central Ottawa were more likely to support decreasing availability in public libraries or recreation centres, or city buildings.
- Those with higher education (university) were more apt to support decreasing the availability in schools, childcare centres, public libraries or recreation centres, or in city buildings.

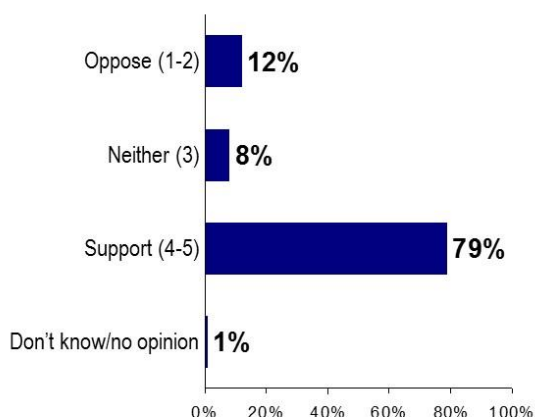
Support for Healthy Food and Drinks

Most Ottawa residents were supportive of city facilities only selling healthier food and drinks with nearly 8 in 10 (79%) either somewhat or strongly supporting the idea. Eight



per cent were neutral, while twelve per cent opposed only selling healthier food and drinks at city facilities.

“How supportive are you of city facilities only selling healthier food and drinks?”



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- Support was stronger among those with no children in the household (18 per cent of those with children oppose the idea).
- Those not born in Canada, along with Ottawa residents who speak French at home, were more likely to support city facilities only selling healthier food and drinks.
- Residents in the east end were more apt to support the idea (92%)

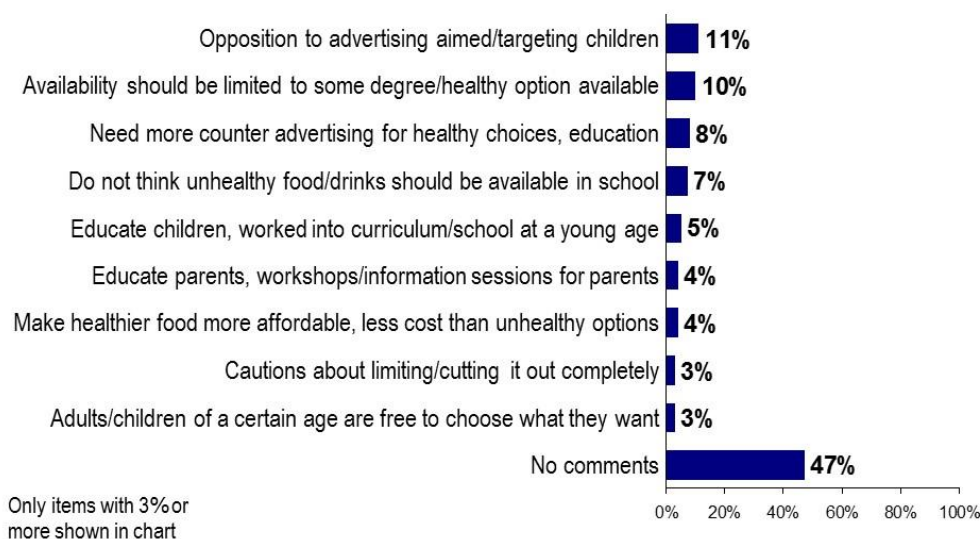
Overall Comments

Just over half of respondents provided further ideas or comments about putting limits on the marketing or access to unhealthy food and drinks within the City of Ottawa. This includes general opposition to advertising targeting children (11%), and that availability should be limited to some degree or have healthy options available (10%). Eight per cent



felt that there needs to be more counter advertising and education for healthy choices. Seven per cent believed that unhealthy food and drinks should not be available in schools. Five per cent of residents offered other comments such as education for young children (5%), education for parents (4%), making healthy options more affordable (4%), cautions about limitations (3%), or that individuals should be free to choose what they want (3%).

“Do you have any other ideas or comments about putting limits on the marketing or where children and youth can get unhealthy food and drinks within the City of Ottawa?”



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n=405

Ottawa Public Health survey, 2017

- Ottawa residents with post-graduate education, along older residents (65+) were more apt to generally oppose advertising aimed at children.
- Those with lower education (high school or less) were more apt to say that availability should be limited to some degree with healthy options available.
- Those with higher income (\$100K+) were more apt to say that healthier food should be made more affordable.



Appendix B: Detailed Analysis of the Public On-line Consultation

A bilingual online survey was open to the public from June 13th to September 22nd, 2017.

Questions were developed using existing literature, OPH marketing to children and youth committee discussions and consultation with experts. The questions were designed to explore the views and beliefs of Ottawa residents aged 16 and over about food and drink marketing to children. As a non-random sample, results can only be interpreted as the views of those who responded, not as a reliable estimate of the views of the population in Ottawa. Because the survey cannot be used to draw conclusions about a larger population, the analysis does not include any significance testing.

Questions dealt with:

- perceptions of marketing to children,
- perceived effects of marketing to children,
- the locations where respondents observed marketing to children,
- support for limiting marketing to children by location,
- support for limiting marketing in proximity to locations, and
- support for limiting access to unhealthy food.

The following definitions were used for the survey:

- **Marketing** refers to any message that advertises or promotes a product or service.
- **Unhealthy foods and drinks** are those that are high in sugar, salt, fat or calories.



Survey participation

The survey was available to the public from June 13th and September 22nd, 2017. When the survey closed, 1058 had completed at least the first question and 745 people completed all sections of the survey.

Some respondents only completed the demographic questions so the total number of people who completed at least the first opinion question (1058) is used as a denominator for the demographic data.

Description of respondents

Table 1 shows the age categories of all those who completed at least one opinion question. Most respondents were young or middle aged adults.

Table 1: Age categories of respondents who answered at least one opinion question (n=1058)

Age group	Count	Percent
16-18	13	1.3%
19-24	82	7.8%
25-44	525	49.6%
45-64	361	34.1%
>65	65	6.1%
Don't know/refused	12	1.1%
Total	1058	100%



Of the respondents who completed the first opinion question, 93% stated they were responding on their own behalf rather than on the behalf of an organization or group, 62% identified as parents, 8% as grandparents, 30% were not parents and 8% did not select a category. Of those who identified as parents, Table 2 shows the children in the household. Of those who identified as grandparents, 90% had no children under the age of 16 in the household.

Table 2: Percent of respondents who identified as parents by children in the household (n=605).

Children in the household	Percent of parents.
No children under 16	21%
Children under 6 only	30%
Children between 6 and 16 only	34%
Children under 6 and 6 to 16	15%

Ninety percent of grandparents had no children under the age of 16 in the home.

Perception of marketing food and drinks to children and youth

When asked if they believe that marketing of food and drinks targets children and youth,

- 83% of respondents agreed that marketing of food and drinks targets children and youth (53% strongly agreed, 30% agreed);



- 86% of respondents agreed that marketing to children affected the food choices children and youth made (56% strongly agreed, 30% agreed);
- 76% of respondents agreed that marketing to children influences parent purchases (27% strongly agreed, 49% agreed); and
- 83% of respondents thought that marketing directed at children and youth was for food that was unhealthy (52% thought it was for food that was very unhealthy, 31% thought it was for food that was unhealthy)

The effects of the marketing of unhealthy food and drinks to children and youth

When asked about the effects of marketing to children,

- 87% thought it likely that it would increase the amount of unhealthy food and drink children consumed (59% very likely, 29% somewhat likely) ,
- 85% felt it normalized the consumption of unhealthy food (64% very likely, 21% somewhat likely),
- 81% felt it would make it more difficult for parents/guardians to get children to make healthy food and drink choices (51% very likely, 30% somewhat likely)
- A majority of respondents felt marketing to children could cause health problems in children and youth (84%: 56% very likely, 27% somewhat likely) or when they became adults (84%: 61% very likely, 23% somewhat likely).
- Less than 2% of respondents said they didn't know how marketing might have these effects.

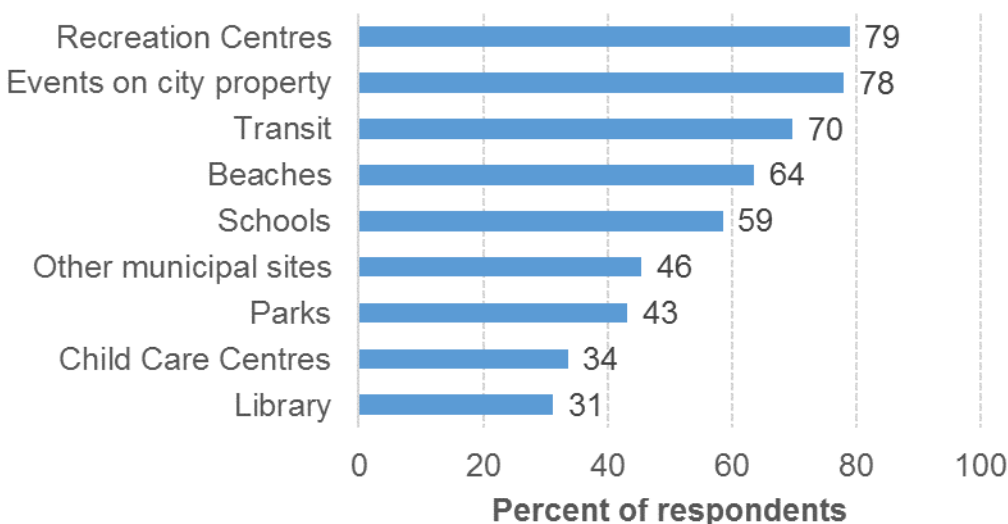
Locations where marketing of unhealthy food and drinks to children and youth was observed

Respondents selected locations where they had observed marketing of unhealthy food and drinks to children from a venue list and types of marketing they may have seen.



Figure 1 shows the percent of respondents who had seen some kind of marketing to children from the list of venues. Venue options were municipal facilities (e.g. libraries, transit) or places children congregate (child-care, schools). Most commonly, respondents said they had seen some kind of marketing to children at recreation centers (79%), events (78%), transit (70%), beaches (64%) or schools (59%).

Figure 1: Percent of respondents who reported seeing marketing of unhealthy food or drinks to children and youth by venue



Data Table for Figure 1

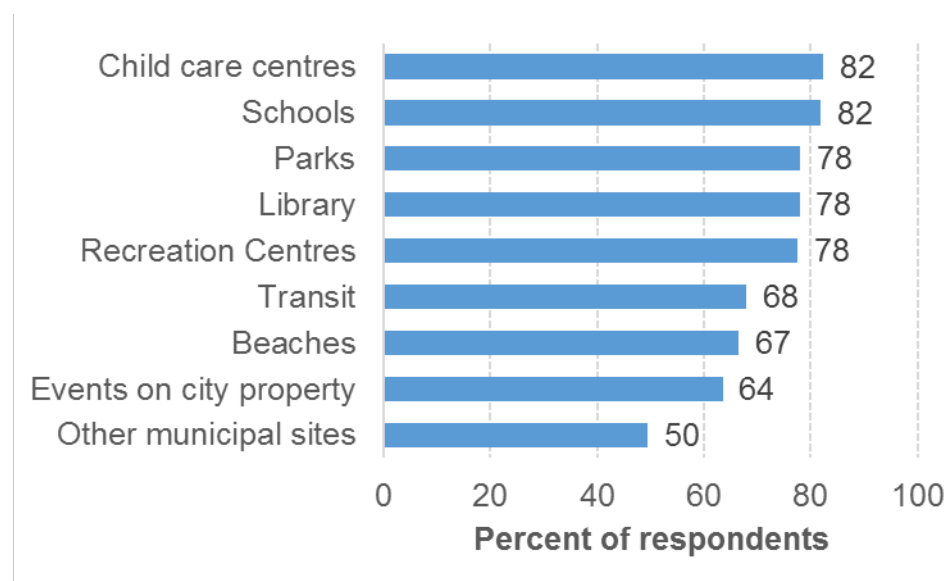
Vending machines, displays, posters and sponsorship of an event or team were the most commonly endorsed marketing methods that respondents said they had seen, although the dominant method varied somewhat by venue. For example, respondents identified posters as the most common marketing in transit venues (61%), whereas respondents identified vending machines most commonly at recreational centres (71%). More details of the particular marketing means by venue are available in Table 7.



Support for limiting marketing of unhealthy food and drinks to children and youth by venue

Respondents indicated their level of support for restricting marketing of unhealthy food and drinks to children and youth by location. Support was strongest for child-care centres (82%) and schools (82%) but more equivocal for transit, beaches, special events on municipal property and other municipal sites (Figure 2)

Figure 2: Percent of respondents that strongly or somewhat support restriction of marketing of unhealthy food or drinks to children and youth by venue (n=769)



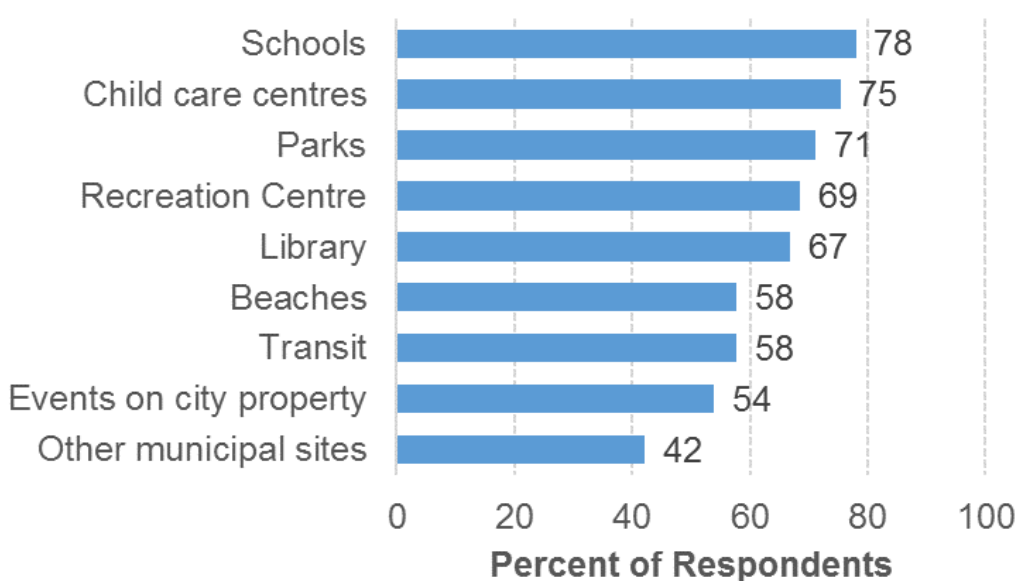
Data table for Figure 2

Support for limiting marketing of unhealthy food and drinks by proximity to locations

Respondents indicated their support for limiting marketing in proximity to particular venues. This could include billboards, signage or mobile food vendors near schools. Support was strongest for limiting marketing close to schools (78%) and childcare centres (75%) (Figure 3).



Figure 3: Percent of respondents that strongly or somewhat support limiting marketing of unhealthy food or drinks near venues (n=759)



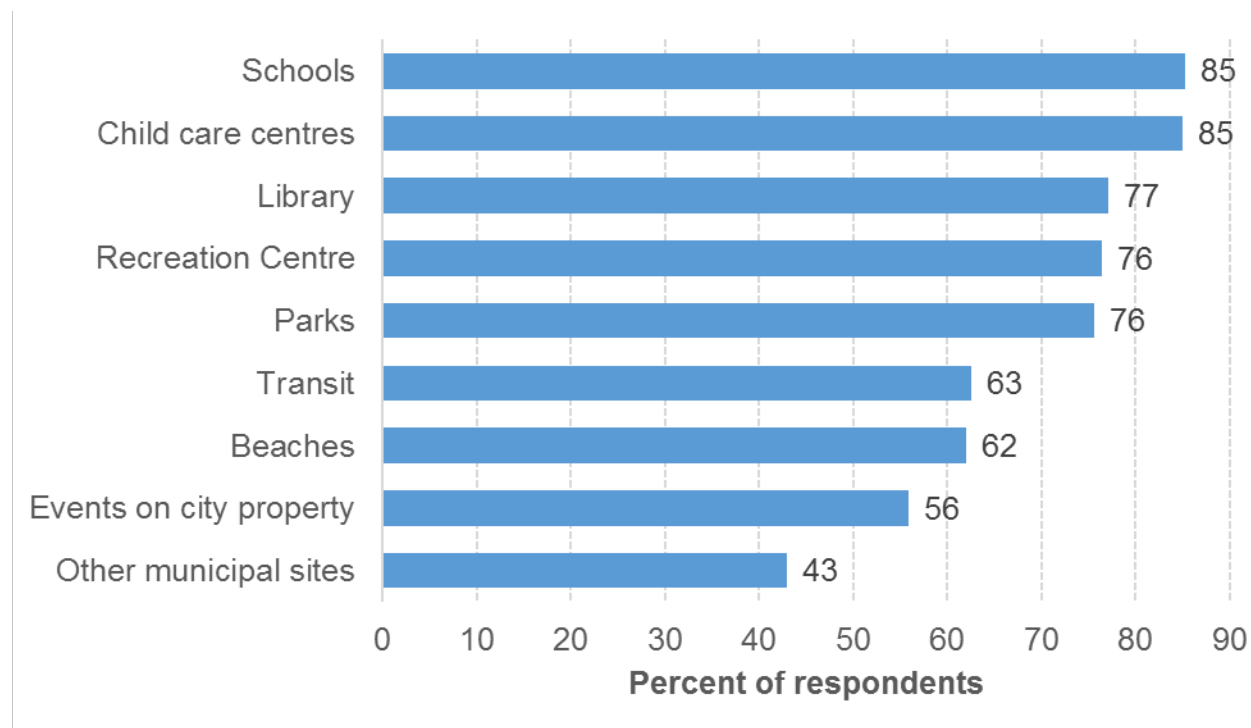
Data Table for Figure 3

Support for limiting access to unhealthy food and drinks by children and youth

In addition to views on marketing, respondents provided views on restricting access to unhealthy food and drinks. A majority of respondents (79%) felt that limiting access to unhealthy food and drinks would improve food and drink choices made by children. Support for limiting access to unhealthy foods was over or approaching 80% for about half the venue options. Support was highest for schools (85%) and child-care centres (85%) (Figure 4). A majority of respondents (79%) strongly or somewhat supported the idea that municipal locations should only be providing healthy food and drinks.



Figure 4: Percent of respondents that strongly or somewhat support limiting access to unhealthy food or drinks by children and youth by venue (n=743)



Data table for Figure 4

Data tables for figures

Table 3: Percent of respondents who reported seeing marketing of unhealthy food or drinks to children and youth by venue (Figure 1). Detailed data is available Table 7.

Venue	Percent
Recreation Centres	78.9
Events on City property	78.0
Transit	69.8



Beaches	63.6
Schools	58.5
Other municipal sites	45.5
Parks	43.2
Child Care Centres	33.6
Library	31.3

Table 4: Percent of respondents that strongly or somewhat support restriction of marketing of unhealthy food or drinks to children and youth by venue. n=769 (Figure 2)

Venue	Percent
Child Care Centres	82.4
Schools	81.9
Parks	78.0
Library	77.9
Recreation Centres	77.6
Transit	67.9
Beaches	66.6



Events on city property 63.5

Other municipal sites 49.5

Table 5: Percent of respondents that strongly or somewhat support limiting marketing unhealthy food or drinks to children and youth near venues. n=759 (Figure 3)

Venue	Percent
Schools	78.0
Child care centres	75.4
Parks	71.1
Recreation Centre	68.6
Library	66.9
Beaches	57.8
Transit	57.7
Events on city property	53.9
Other municipal sites	42.1

Table 6: Percent of respondents that strongly or somewhat support limiting access to unhealthy food or drinks to children and youth by venue n=743 (Figure 4)

Location	Percent
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Schools	85.3
Child care centres	85.0
Library	77.1
Recreation Centre	76.4
Parks	75.6
Transit	62.6
Beaches	62.0
Events on city property	55.9
Other municipal sites	43.0

Supplementary Data

Table 7: Percent of respondents identifying particular marketing modes by venue.

Venue	Vending	Display	Sponsor	Mascot	Online	Poster	Contest	Celebrity	Not observed
Child care centres (n=676)	24%	17%	17%	15%	13%	12%	11%	10%	66%
Library (n=694)	26%	9%	5%	4%	9%	7%	4%	2%	69%
Transit (n=715)	24%	20%	18%	18%	8%	61%	18%	22%	30%
Recreation Center (n=734)	71%	40%	38%	20%	9%	36%	20%	14%	21%
Beaches (n=685)	46%	40%	22%	12%	5%	28%	18%	10%	36%
Parks (n=688)	22%	19%	23%	10%	3%	16%	12%	6%	57%
Schools (n=716)	51%	23%	17%	11%	9%	14%	14%	7%	41%
Events on City property (n=742)	69%	70%	61%	42%	25%	70%	48%	34%	22%