A Multidimensional Approach to Reduce the Appeal of Sugar-Sweetened Beverages

This report is a central component of the project entitled “A Multidimensional Approach to Reducing the Appeal of Sugar-Sweetened Beverages (SSBs)” launched by the Association pour la santé publique du Québec (ASPQ) and the Quebec Coalition on Weight-Related Problems (Weight Coalition) as part of the 2010 Innovation Strategy of the Public Health Agency of Canada on the theme of “Achieving Healthier Weights in Canada’s Communities”. This project is based on a major pan-Canadian partnership involving:

- the Réseau du sport étudiant du Québec (RSEQ)
- the Fédération du sport francophone de l’Alberta (FSFA)
- the Social Research and Demonstration Corporation (SRDC)
- the Université Laval
- the Public Health Association of BC (PHABC)
- the Ontario Public Health Association (OPHA)

The general aim of the project is to reduce the consumption of sugar-sweetened beverages by changing attitudes toward their use and improving the food environment by making healthy choices easier. To do so, the project takes a three-pronged approach:

- The preparation of this report, which offers an analysis of the Canadian sugar-sweetened beverage market and the associated marketing strategies aimed at young people (Weight Coalition/Université Laval);
- The dissemination of tools, research, knowledge and campaigns on marketing sugar-sweetened beverages (PHABC/OPHA/Weight Coalition);
- The adaptation in Francophone Alberta (FSFA/RSEQ) of the Quebec project Gobes-tu ça?, encouraging young people to develop a more critical view of advertising in this industry.

The SRDC will conduct a formative evaluation throughout the entire project.

This report, which is a component of the project entitled “A Multidimensional Approach to Reducing the Appeal of Sugar-Sweetened Beverages”, has been prepared by the Quebec Coalition on Weight-Related Problems, with Université Laval helping to evaluate the nutritional value of the products. All project partners (Appendix 3) contributed to disseminating the contents of this report and its conclusions.
Acknowledgments

This project has been made possible through a financial contribution from the Public Health Agency of Canada. The views expressed herein represent the views of the Weight Coalition and do not necessarily represent the views of the Public Health Agency of Canada.

We wish to thank all the partners in the project entitled “A Multidimensional Approach to Reducing the Appeal of Sugar-Sweetened Beverages” for their involvement and support, and for their contribution in the editorial preparation of this report.

Last but not least, we wish to sincerely thank our advisory committee made up of the following individuals. Their presence on the advisory committee should not be interpreted as an endorsement or approval of the Weight Coalition’s positions expressed in this report.

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Introduction

Sugar-sweetened beverages are proliferating on supermarket shelves, in convenience stores, arenas, vending machines, sports centres and the various public places frequented by young people. The increasingly wide range of differentiated products, combined with their unprecedented availability, allows consumers to have sugar-sweetened beverages anywhere at any time and often at very low prices. Sugar-sweetened beverages also benefit from intense advertising that mainly targets a young population using social media, product endorsements by athletes and sports teams, as well as many other marketing strategies. The consumption of sugar-sweetened beverages has therefore become worrying in light of the many consequences on health, particularly among the young, who are highly susceptible to the marketing of these products.

While health professionals worry about today’s consumption of sugar-sweetened beverages, particularly by our youth, marketeers are cleverly using new technologies, new media and massive budgets to reach this target population and encourage them to consume sugar-sweetened beverages. For example, in 2004, the food, drink and snack industries in the United States spent 1,178 times as much on advertising as the government spent on its “5 A Day” campaign to promote eating fruit and vegetables. This represents more than US$11.26 billion advertising per industry, versus the US$9.55 million spent by the Federal and the California State governments on the “5 A Day” campaign. The industry’s ongoing massive investment makes a level playing field impossible, which is why public health campaigns are not enough to make the difference. We therefore need to identify all other possible avenues for action and must prioritize the creation of environments that promote healthy eating habits.

The Marketing of Sugar-Sweetened Beverages: A Topic to Sink Your Teeth Into!

The 2006 Petit Robert dictionary defines marketing as “the set of actions whose purpose is to analyze the present or potential market of a good or service and to implement the means to satisfy, stimulate or create demand for it”.

Marketing and the “Four Ps”

In this report, we want to present a view of the Canadian sugar-sweetened beverage market as a whole, as well as the marketing strategies used in this industry to reach young people. To do so, we split the information into four distinct but complementary sections, using “marketing mix” as the underlying organizing principle to focus on Product, Price, Place and Promotion, commonly known as the “four Ps” of marketing. These “four Ps” are also used by the companies themselves when defining their global marketing strategies.

This analytical structure allows us to determine the extent of sugar-sweetened beverages marketing, as well as to make recommendations. We hope that these avenues of thought can serve as a basis for implementing concrete actions and public policies that reflect the reality of the Canadian market and are aimed at eventually reducing the consumption of these drinks that can be harmful to one’s health. In this respect, we should note that the World Health Organization (WHO) has recognized that the regular consumption of sugar-sweetened beverages is a probable contributing factor to the global obesity epidemic.
Volume 2 – Price: An Argument That Pays Off

In this second volume, entitled *Price: An Argument That Pays Off*, we continue our examination of the various marketing techniques used by sugar-sweetened beverage (SSB) manufacturers. This time we are focusing on their product pricing techniques. Lastly, we will discuss promising measures that can be implemented to reduce the attractiveness of sugar-sweetened beverages by acting on their price.

Definition of “Sugar-Sweetened Beverages”

Although sugar-sweetened beverages worry and mobilize people of all viewpoints, there is no consensus or legal definition of the term “sugar-sweetened beverage” in Canada today.

To facilitate our analysis, we borrowed from various suggested definitions, in particular, the one used by the Government of Canada in its children’s health and safety campaign aimed at sugar-sweetened beverages. Therefore, in this report we have used the term “sugar-sweetened beverages” to refer to any drink for human consumption, carbonated or not, that contains added sugar.

More precisely, we have identified seven categories of sugar-sweetened beverages that will be analyzed in this report:

- soft drinks
- energy drinks
- sports drinks
- punch and cocktail-type fruit drinks (excluding 100% fruit juice)
- enriched/vitamin-enhanced water
- ready-to-drink tea and coffee
- flavoured milk

We are aware that there are other categories of sugar-sweetened beverages (soya-based drinks, slushes, etc.). Although they often contain added sugar, we will not be analyzing these drinks in this report. Nevertheless, certain marketing strategies associated with their merchandising may occasionally be referred to.

Sugary products with a sweetening agent, otherwise known as “diet” drinks, are outside the scope of this report. We should note, however, that the health impact of these drinks is currently the subject of considerable debates, and it should not be automatically assumed that they are a “healthy” alternative to sugar-sweetened beverages.

Consumption of Sugar-Sweetened Beverages by Young Canadians

The energy value of drinks for children and teens is not negligible and is often underestimated. In Canada, the drinks consumed by children and teens account for 20% of their daily calorie requirements.

As for plain soft drinks (including energy drinks and iced tea) and fruit drinks, children and teens in Canada consumed an average of 309g/day. This figure varies somewhat from province to province with Newfoundland & Labrador and New Brunswick reporting a considerably higher consumption, with averages of 421g/day and 368g/day, respectively, while British Columbia is the lowest consumer of sugar-sweetened beverages at an average of 249g/day.
Children in Canada get into sugar-sweetened beverages at a very early age, and their consumption increases as they progress into adolescence, peaking at ages 14-18.

**Table 1: Beverage consumption of children and teens**
Adaptation of data drawn from Statistics Canada (2008)⁹

<table>
<thead>
<tr>
<th>% consuming SSB the day before the interview</th>
<th>Ages 1-3</th>
<th>Ages 4-8</th>
<th>Ages 9-13</th>
<th>Ages 14-18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily consumption of SSB in grams</td>
<td>104</td>
<td>205</td>
<td>332</td>
<td>465</td>
</tr>
</tbody>
</table>

Until the age of 13, young Canadians seem to prefer fruit drinks over plain soft drinks. This trend, however, reverses among teens 14 to 18. Moreover, health statistics analyst Didier Garriguet has found differences in consumption between boys and girls. In general, boys drink more sugar-sweetened beverages than girls, particularly soft drinks. Looking at sugar-sweetened beverages as a whole, 14- to 18-year-old boys consume about half a litre a day while girls drink about a third of a litre. These sugar-sweetened beverages represent 8% of the daily energy intake for boys aged 14-18 and 7% for girls the same age.

A recent survey of 10,000 teens ages 13-17 conducted by the Réseau du sport étudiant du Québec (RSEQ),¹⁰ reported that they regularly¹ consume:
- fruit-flavoured drinks: 61%
- soft drinks: 44% (53% among boys)
- sports drinks: 28% (boys twice as much as girls, and this ratio quadruples when we look at frequent consumption (“every day or nearly every day” and “3 to 4 times a week”), with 4% for girls and 16% for boys).
- As for energy drinks, 35% of the young people surveyed drink them occasionally.²

In addition, we have recently found that soft drinks, energy drinks and iced teas are the main source of sugar for 9- to 18-year-olds in Canada, while fruit drinks rank 5ᵗʰ among 1- to 8-year-olds.¹¹ The data used for this study is from 2004. Since then, the sharp increase in energy drinks and the arrival on the market of vitamin-enriched water and enriched fruit drinks suggests that sugar-sweetened beverages may be responsible for delivering even more sugar to young Canadians.

¹ The frequency of consumption options in the questionnaire distributed to young people were:
- Every day or almost every day
- 3 to 4 times a week
- 1 to 2 times a week
- Rarely
- Never

"Regular" consumption includes categories from “1 to 2 times a week” to “Every day or almost every day”.

² “Occasional” consumption falls between the categories of “rarely” and “every day or nearly”. 
Table 2: Sugar consumption among Canadians of all ages
Statistics Canada (2011)\textsuperscript{12}

<table>
<thead>
<tr>
<th>Ages</th>
<th>% of total sugar from regular soft drinks</th>
<th>% of total sugar from fruit drinks</th>
<th>% of total sugar from “sugar-sweetened beverages”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 1-8</td>
<td>3.6%</td>
<td>6.2%</td>
<td>9.8%</td>
</tr>
<tr>
<td>Ages 9-18</td>
<td>14.3%</td>
<td>9.1%</td>
<td>23.4%</td>
</tr>
<tr>
<td>Ages 19 and +</td>
<td>13%</td>
<td>3.7%</td>
<td>16.7%</td>
</tr>
</tbody>
</table>

Sugar-sweetened beverages therefore participate, in a non-negligible way, in the total sugar consumption of young Canadians. Moreover, it is among boys aged 14-18, who are also some of the biggest consumers of sugar-sweetened beverages, that the absolute quantity of sugar consumption is the highest (172g a day, or 41 teaspoons), which puts them well above the national average of 110g a day (or 26 teaspoons), while the recommended daily glucose requirement for teens is 100g\textsuperscript{13}.

As for the consumption of other types of sugar-sweetened beverages, there is little data accessible or available in Canada. A 2010 report by an expert group on caffeinated energy drinks commissioned by Health Canada emphasized the “general absence of data on the consumption of energy drinks by children and teens”.\textsuperscript{14} The market in added-value drinks (drinks for athletes, vitamin-enriched and energy drinks) is relatively recent, but seems to be growing strongly in Canada, especially among the young. Nearly 7 million units of energy drinks are consumed in Canada every year.\textsuperscript{15}

Health Impact of Sugar-Sweetened Beverages

The consumption of sugar-sweetened beverages is increasingly deplored by health professionals because of its negative impact on health, particularly among young people.

Like many countries around the world, Canada today has worrying levels of obesity, among adults as well as children. Astonishingly, more than 1 in 4 children in Canada are overweight or obese.\textsuperscript{16} Moreover, although many factors contribute to obesity, respected international agencies such as the Institute of Medicine,\textsuperscript{17} the Center for Control Disease and Prevention,\textsuperscript{18} the United States Department of Agriculture\textsuperscript{19} and the Rudd Center\textsuperscript{20} are proactively engaged in trying to reduce the consumption of sugar-sweetened beverages that are directly implicated in the obesity epidemic. In a recent campaign,\textsuperscript{21} the Canadian Government identified sugar-sweetened beverages as a contributor to obesity in children. And for good reason, as the daily consumption of sugar-sweetened beverages increases the risk of obesity by 60% in children,\textsuperscript{22} thereby also increasing the risk of developing associated diseases such as type 2 diabetes, cardiovascular diseases and certain types of cancer. In a review of verified findings on 28 diet factors thought to be associated with obesity among children, the consumption of sugar-sweetened beverages was the only behaviour consistently linked to excess weight in children.\textsuperscript{23}

A Considerable Economic Impact

Action becomes imperative when we recognize the alarming prevalence of excess weight, obesity and chronic disease that creates major costs for the State, our health system and our society as a whole. The most conservative estimates suggest that obesity alone adds some $4.3 billion a year\textsuperscript{24} to Canada’s tax bill, while actuaries estimate the cost is in the order of $30 billion a year.\textsuperscript{25}
To reduce health costs related to obesity and associated chronic diseases, we need to act on its causes from the earliest ages. “The probability of childhood obesity persisting into adulthood increases with the age of the child (from 20% to 50% for pre-teens to 50% to 70% for pubescent adolescents).”\textsuperscript{26} Clearly there is a strong case for investing in our younger generations by helping to protect them from known risk factors for unhealthy weights.

Moreover, in addition to the links established between sugar-sweetened beverages and obesity,\textsuperscript{27} these drinks are also directly implicated in type 2 diabetes,\textsuperscript{28} dental caries,\textsuperscript{29,30} dental erosion,\textsuperscript{31} and cardiovascular disease.\textsuperscript{32,33}

**Caffeine: An Ingredient No Longer to be Taken Lightly!**

First and foremost, energy drinks are sugar-sweetened beverages, but the large amount of caffeine they contain is an additional source of concern.\textsuperscript{34} The energy drinks that young people consume quickly reaches the daily caffeine intake that is recommended by Health Canada.\textsuperscript{35} “Exceeding recommended daily caffeine limits can produce side effects, from simple nausea to serious cardiac problems.”\textsuperscript{36}

**Mobilization of Canada’s Health Professionals**

As the impact of sugar-sweetened beverages on health and especially on obesity is increasingly a matter of public record, we now need to help the country join forces to tackle the challenge. There are many youth-oriented projects in place, with a common objective, which is to reduce the consumption of sugar-sweetened beverages.

**The Position of Key Actors in Canada**

As mentioned above, the Canadian Government’s position is to keep the population informed of the link between sugar-sweetened beverages and obesity. In addition, Canada’s Food Guide recommends drinking water and restricting the consumption of sugar-sweetened beverages “that can be high in calories and low in nutrients”.\textsuperscript{37}

Other Canadian agencies have also expressed concern about the consumption of sugar-sweetened beverages, in particular:

- the Alberta Policy Coalition for Chronic Disease Prevention
- the Chronic Disease Prevention Alliance of Canada (CDPAC)
- the Canadian Diabetes Association
- the Childhood Obesity Foundation
- the Quebec Coalition on Weight-Related Problems
- the Dieticians of Canada
- the Federation of Medical Specialists of Quebec
- the Heart and Stroke Foundation
- the activists of the Quebec Liberal Party
- the Ordre des hygiénistes dentaires du Québec
- the Canadian Pediatric Society
- Québec en forme
Our Youth: An Ideal Target for Manufacturers of Sugar-Sweetened Beverages

We established earlier that regular soft drinks (including energy drinks and iced tea) are very popular among Canadian teens and that they are the main source of sugar for 9- to 18-year-olds. This enormous consumption is partly the result of a massive investment by the industry of sugar-sweetened beverages to reach this young population. Indeed, due to their greater susceptibility to marketing and their increasing purchasing power, children and teens are now this industry’s target of choice. Moreover, according to a WHO report, “The enormous expenditure on marketing fast food and other products in the ‘consume as little as possible’ category (US$11 billion in the United States alone in 1997) is a key factor in the increasing consumption of ready-to-eat food in general and in high-energy but low-nutritional and low-trace-element foods in particular.”

Vulnerability of Children and Teens

Children and teens are highly susceptible to the various marketing strategies used to reach them and are incapable of recognizing the commercial purpose of some ads. In fact, young children cannot distinguish the content of the message from its advertising purpose. From 4 to 5 years of age, children start being able to distinguish between a program and advertising, but the latter is perceived as just additional entertainment, until at least ages 7 or 8. After that, as their cognitive and social development progresses, young people become increasingly able to discern marketing intent. Understanding the true nature of advertising, which is to try to sell a product in order to make a profit, is not something that all children understand until the onset of adolescence, at about ages 11 to 12. More still, a recent survey of 10,000 young Quebecers by the Réseau du sport étudiant du Québec reported that nearly half of the teens surveyed could not distinguish between the various types of strategies used by manufacturers to sell more sugar-sweetened beverages.

A Purchasing Power Targeted by Industry

Children have had a growing direct and indirect economic power affecting all industries. This is partly because they get pocket money that they can spend any way they like. Canadian children 2-12 years old spent an estimated CAD$1.5 billion pocket money in 2002. It is also because children influence 40% of family spending, accounting for more than CAD$20 billion in 2004.

Companies rely enormously on this influence, and even try to accentuate it by developing what is commonly known as the “nag factor”. This nag factor can be described as a child’s incessant demand for a product or brand that influences the parent’s buying decisions. Companies target children directly through advertising and target parents indirectly but deliberately through harassment.

A study has been released on the nag factor associated with various product categories aimed at children or adults. It also looks at soft drinks “because they are clearly important for children...and because it is a category in which teens have the most impact on buying decisions”. The findings suggest that the nag factor is real in the product categories aimed at children, which include soft drinks.

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iii Free translation
Marketing Investment by the Sugar-Sweetened Beverages Industry

In the absence of Canadian data on marketing investment by the sugar-sweetened beverages industry we will use U.S. data, mainly released by the Federal Trade Commission (FTC) in a 2008 report on the industry’s spending on marketing aimed at young people. ⁵⁰

Among the 44 companies studied by the FTC, the total spending to promote food and drink to children and teens amounted to US$1.6 billion in 2006. Soft drinks accounted for US$492 million, 96% of which was directly aimed at teens (US$474 million, nearly US$20 per teen⁵¹), classifying these SSB brands as the largest youth-targeting investors. Non-carbonated drinks accounted for US$109 million (3rd largest) aimed at teens. In 2010, drinks companies spent US$948 million to promote sugary and energy drinks in all the media surveyed, 5% more than in 2008. ⁵²

Over the course of this report, where the data is available, we will detail the spending by the sugar-sweetened beverages industry in keeping with marketing strategies and media used.
Price and its Power of Attraction

SSB manufacturers always rely mainly on two techniques in their marketing mix to win customers and retain their loyalty: extraordinarily creative communication and unbeatable offers (refunds, competitions, coupons, cross-promotions, etc.) Price and promotions are therefore closely linked. Some of the strategies referred to in this volume will be explored more extensively in Volume 4 on Promotions.

The SSB market has never been so vast, and competition is fierce. The industry is therefore using every means it can to make its products stand out and entice consumers. Price has always been an important selling argument, and it is a key element in marketing strategies, especially because it has such a great influence on buying decisions. In the difficult economic context of recent years, prices have an even bigger impact. Sugar-sweetened drinks do not escape this rule and are regularly featured in promotions, boosting their attractiveness, especially among young people.

Demand Fluctuates According to Price

According to Caroline Urbain, author of *Prix et stratégie marketing*, “Price influences the level of demand and thus the level of business, profitability and overall perception of the product or brand.” The demand for sugar-sweetened beverages—and soft drinks in particular—is price-elastic. In other words, reducing the price of SSBs results in increased demand, while increasing their price reduces the demand for these products.

A systematic review of the research into the demand elasticity of food concluded that increasing the price of soft drinks by about 10% could reduce their consumption by 8-10%. Based on these results, we could consider pricing as a possible way to discourage consumers from buying SSBs. We will discuss this at the end of this chapter.

Price Influences Buying Decisions

Many factors come into a consumer’s decision-making process, but price remains a variable that undeniably influences food choices. This is clearly the case among young people for whom price is a key factor, after taste, influencing eating habits. Thus, the low price of certain sugar-sweetened beverages can only increase their attractiveness among this target population, which, despite its growing purchasing power, is made up of consumers with small budgets.

Pricing policies allow brands to effectively fight competition and retain their market shares. Promotions are therefore announced in the traditional media and at points of sale, as well as on the websites of certain distributors. The point of sale remains the ideal spot to influence consumer choice because most buying decisions (65% to 80%) are made there. An attractive price thus stimulates a spontaneous purchase.

The influence of price on consumption is particularly true in the case of soft drinks, especially among lower-income consumers. Retailers do know their targets! For example, you will often see “student special” promotions near schools. “Take any drink that normally sells over $2, advertise that it’s now 99 cents, and all the kids will try it,” said the owner of a convenience store near a school.
Who Sets the Prices?

An effective pricing policy is beneficial both for the manufacturer, who wants to see his products doing well, and for the distributor, who is looking to increase customer traffic and expenses in his store. This is why setting prices and promotions is generally a bargaining process between the manufacturer and the distributor/retailer. These prices are usually set by considering market prices, the competition, and the desire to promote a product and to create traffic in well-targeted locations. Special offers therefore change from one location and store to another, week after week.

For the major distribution chains (e.g., IGA, Métro, etc.), most merchandising agreements negotiated between manufacturers and distributors are centralized decisions, and the affiliated retailers simply apply the set prices and promotions. Independent retailers, however, negotiate directly with the manufacturers and set their own prices in their stores.

Manufacturers sometimes use incentives such as gifts, promotional material, discounts or bonuses to encourage retailers to price their products attractively. For example, a manufacturer may offer a retailer a free case of drinks for every 20 cases sold.
Four Price-Related Promotional Strategies

The composition of these products and their high sales volumes allow sugar-sweetened beverage manufacturers to keep prices relatively low while maintaining attractive profit margins. In fact, most of the SSBs considered in this report (apart from milk drinks) consist mainly of water, an abundant and very affordable natural resource in Canada. Also, the volumes generated by the major SSB companies are massive. For example, on average, Canadians consumed 56 litres of Coca-Cola branded drinks in 2010.

According to certain estimates, the cost of a soft fountain drink in a restaurant can vary from $0.05 to $0.20 a portion for the merchant. For customers, an average fountain drink costs between about $1.30 and $2.30, depending on the format. This means that the profit margin on these drinks is massive. In fact, the cost of soft drinks is so low that the paper cups would represent a bigger expense than their contents.

In general, the initially low price of a SSB already has an undoubted power of attraction on consumers. Thus, despite low prices and many discounts, SSB manufacturers still reap high profits. According to Fortune 500 and The Coca-Cola Company, the profits from the Coca-Cola business topped $11 billion in 2010, an increase of 73% on the year before. PepsiCo also posted a healthy $6 billion for 2010. As for energy-drink companies, Monster® products generated $1.3 billion in sales in 2011 and Red Bull® brand revenues topped $5 billion in 2010.

Price-related promotional strategies are therefore highly profitable for the industry and have an impact on the consumption of sugar-sweetened beverages. Therefore, we wanted to bring to light the four main technical principles implemented to entice consumers.

One Category, One Price

The varying pricing policies among the different categories of sugar-sweetened beverages tend to influence consumer perception of these products. Although competitor prices are generally the same over the long term in each category, we see great price variations between the different categories. In general, soft drinks will be sold at lower prices than supposedly “added value” drinks such as vitamin-enriched water, sports drinks or energy drinks.

The Low Price of Soft Drinks

In Canada, although the prices of basic products (fruit and vegetables, eggs, bread, butter, oil, etc.) have risen sharply since 1995, soft drink prices have risen very little. In particular, comparing prices between January 1995 and August 2009:

- bread prices increased 98%,
- butter, 53%,
- versus 11% for cola-type soft drinks and 6% for lemon-lime soft drinks.
Thus, the purchasing power of Canadians is trending downwards in terms of food and certain drinks (milk) while it tends to remain constant in terms of sugar-sweetened beverages, making them relatively more affordable and attractive.

A similar trend can be seen in the United States. Furthermore, according to K. Brownell and T. Frieden, the fact that soft drinks are increasingly affordable (to the detriment of fruits and vegetables, which are becoming more and more costly) probably contributes to the increasing obesity in the United States.76

The low production cost of these drinks (mainly water and sugar, or one of its derivatives, including corn syrup, which is high in fructose and costs much less than pure sugar), coupled with the resulting profit margin, as well as the high volume of sales of these products, can explain their prices have changed so little.

Soft drinks are generally cheaper than all the other sugar-sweetened beverages considered in this report and are therefore more affordable for cost-conscious consumers.77
Added Value for a Higher Price

For their part, “added value” drinks justify their higher prices by using “high quality” ingredients and by adding vitamins and minerals perceived by consumers as beneficial. Also, setting higher prices for a specific category can lead the consumer to perceive them as providing additional benefits associated with the product and as being higher quality. The price therefore reflects less the components of the product than the symbolic aura created around these products.

Vitaminwater®, for example, uses reverse osmosis water in its products, which is actually purified water to which vitamins and minerals are added, giving it a “healthy” aura, although it is mainly sugary water. A 591 ml bottle of Vitaminwater® sells for more than $2 in Canada. The consumer thus pays a high price for sugary water with a few added vitamins and minerals. The same is true for energy drinks, which promise consumers all sorts of benefits and sell for approximately $3 per 473 ml can. Sports drinks cost on average between $1.50 and $2 per 710 ml bottle because their formulation helps athletes rehydrate, but they are inappropriate for consumers who drink them without playing sports.

Omnipresent Discounts for Guaranteed Success

There are always promotions, regardless of the beverage

“Added value” drinks are more expensive, but always on special offer

The pricing strategy adopted for supposedly “added value” drinks can represent a major disadvantage for the industry, as it can hold back consumption of these beverages by people on smaller budgets, particularly younger people. However, many promotions can be put in place, especially to encourage this segment of the population to try out and use these products. These promotions may consist of reducing the initial selling price on individual portions or on packs (see photo opposite), or offering advantages by buying multiple portions (e.g., 2 for $4), as shown in the photo of energy drinks below.
Various brands of energy drinks are offered here as 2 for $4, whereas the original single price was $2.99. The $4 promotion applies only if the consumer buys two drinks. Single drinks are also on offer, but at $2.29. This 2 for $4 technique (for example) encourages the consumer to buy more and therefore, to consume more. By encouraging multiple purchases, these promotions allow the retailer to increase sales volumes and thus “offset the drop in revenue associated with the discount”.

**Soft Drinks: low prices that don’t exclude further discounts**

Despite their already relatively low prices, soft drinks are very regularly on special offer. Here are some examples.

Shown here is a 6-pack on special offer at Couche-Tard in November 2011 for $1.99, which is $0.33 per can or $0.09 per 100 ml.
These 2-litre bottles of various brands of soft drinks are on sale at Pharmaprix at $0.99, or $0.04 per 100 ml, and are placed right in the middle of the aisle leading to the checkout. Furthermore, note that the bottles of soft drinks are positioned beside bags of chips to promote cross-sales, which we will address later in Volume 4 on Promotions.

The presence of sugar-sweetened beverages in pharmacies will be discussed in Volume 3 on Distribution.

Any occasion is a good one to reduce prices and increase consumption.

Any occasion is a good time to incite consumers to try a product, to encourage them to choose a particular brand on the shelves or to draw them into a store. Various strategies are employed to do so, such as discounts in stores and in flyers, as well as coupon distributions.

Super Bowl

Take for example the Super Bowl on February 5, 2012. More than 111 million Americans and 8 million Canadians would have been watching the game on television, and almost half the population would have seen all or part of the game. A number of food distributors therefore take advantage of this event to offer SSBs at reduced prices, increasing their attractiveness even more. Here are some examples of special offers found in flyers (Walmart, Pharmaprix and IGA).

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Anniversary of the Coca-Cola Brand
In May 2011, on Coca-Cola’s 125th anniversary, all members of the icoke.ca website (which is aimed mainly at teens) were emailed a printable coupon entitling them to a drink for 5 cents. This promotion, which was a reference to the price of the very first Coca-Cola® drinks, was part of a set of promotional events that took place during this “anniversary” year, which will be described in Volume 4 of this report.
Holidays

The photo below shows point-of-sale (POS) advertising on a stack of 12-packs, urging us to “really savour the holidays!” by drinking Canada Dry® at a special low price. The detachable coupons at the bottom of the POS display allow you to save $1.50 on every 12-pack of 355 ml Canada Dry through December 31, 2011.

Promotions for the Consumer and Benefits for the Retailer

We have seen earlier, in the various illustrated examples, that sugar-sweetened beverages of all kinds are regularly on special offer. By reducing unit prices, manufacturers hope to increase the sales volumes of their products, and retailers hope to attract customers into their stores especially by advertising in flyers and on their windows. Also, the frequency and magnitude of their special offers ensure the brand an ongoing visibility in retailers’ flyers. Moreover, this promotional strategy is apparently very “fruitful” for them, both in terms of sales and the power to attract consumers into their stores. In fact, some retailers use these promotions as bait. In some cases, sugar-sweetened beverages are regularly used as “loss leaders”, i.e., they are sold at cost and in some cases even at a loss. According to Professor Bernard Dagenais of Université Laval’s Department of Information and Communication, “the advertising surrounding these specific products is undertaken in the hopes of getting people who are attracted by bargain basement prices into the commercial establishment.”

The photo opposite illustrates the potential attraction that sugar-sweetened beverages can represent. Here, at Couche-Tard in Montreal, 12-packs of 355 ml cans were advertised in the window at $2.99, or $0.25 per can and $0.07 per 100 ml.
Convenience stores and service stations love promotions like this. According to VIG magazine, which is aimed primarily at these stores, “Customers always want more for their money, so promotions are an excellent way of getting people into your store and growing sales.”

**Prices that encourage people to buy large quantities**

Although consumers are generally impulsive at the place of sale, they are nonetheless observers. As mentioned in Volume 1 on Product, the proliferation of formats in the market is explained by a sophisticated segmentation of target consumers, among other factors. The propensity for large portions targets not only families but also consumers looking for “value for money”. In fact, these large formats are generally more advantageous in terms of price than individual portions in supermarkets and public places. Many of the promotions we looked at above encourage the purchase of many bottles rather than just one (2 for $4, for example). This could directly result in increased consumption of these sugar-sweetened beverages.

**Table 4: Comparison between the selling price and the price per 100 ml of various formats of soft drinks**

<table>
<thead>
<tr>
<th></th>
<th>12-pack of 355 ml cans</th>
<th>6-pack of 710 ml bottles</th>
<th>2-litre bottle</th>
<th>6-pack of 237 ml cans</th>
<th>1-litre bottle</th>
<th>591 ml bottle</th>
<th>355 ml bottle</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selling price</td>
<td>$5.89</td>
<td>$4.99</td>
<td>$2.39</td>
<td>$3.99</td>
<td>$2.19</td>
<td>$1.99</td>
<td>$0.99</td>
</tr>
<tr>
<td>Price per 100 ml</td>
<td>$0.138</td>
<td>$0.117</td>
<td>$0.119</td>
<td>$0.280</td>
<td>$0.219</td>
<td>$0.336</td>
<td>$0.278</td>
</tr>
</tbody>
</table>

For example, the comparison per 100 ml in the table above shows that “large-format” soft drinks are generally less costly than smaller ones. As for the 6-pack of 237 ml cans, these individual small-format packs highlight their “low” calorie content and are aimed at weight-watchers, who are generally prepared to pay more if the product seems more “healthy”.

**Movie Theatres**

In movie theatres, food is omnipresent. With triple offers approaching $15, they make most of their profits from food counters. Consumers are therefore bombarded by tempting offers on sugar-sweetened beverages, among other things. They are enticed to consume large formats at prices just above that of smaller quantities.

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iv Quebec prices on November 15, 2011, in an IGA supermarket (Pepsi® except for 591 ml and 355 ml Coca-Cola), ignoring potential promotions.
Table 5: Prices of fountain SSBs sold in movie theatres

<table>
<thead>
<tr>
<th></th>
<th>16 oz ≈ 473 ml</th>
<th>32 oz ≈ 946 ml</th>
<th>44 oz ≈ 1.3 l</th>
</tr>
</thead>
<tbody>
<tr>
<td>Selling Price</td>
<td>$3.89</td>
<td>$4.39</td>
<td>$4.89</td>
</tr>
<tr>
<td>Price per 100 ml</td>
<td>$0.82</td>
<td>$0.46</td>
<td>$0.38</td>
</tr>
</tbody>
</table>

The consumer can get almost three times more drink for the modest sum of one extra dollar. If we compare against the prices per 100 ml, large formats are half the price of small formats. In the movie theatre visited as part of our research, large cups were also encouraged by various strategies such as a panel inviting the consumer to “go to the next level”, as well as a special promotion (collectable glasses) that applied to large formats only. We will look at these types of promotions in greater detail in Volume 4 on Promotions.

Combining Fast-Food and SSBs: a winning partnership

Some big companies develop partnerships with one another. In the case of sugar-sweetened beverages, it is often to set up exclusive distribution contracts for their products in certain stores. For example, McDonald’s® and Coca-Cola® have been partners for 56 years, and this is mainly reflected in exclusive distribution of various Coca-Cola® branded products in McDonald’s® restaurants. The fact that these two brands each dominate their respective sectors, that they each have a solid and established image and that they are both targeting essentially the same market, i.e., young people, accentuates the benefits of such a partnership. For its part, Pepsi® is present on an exclusive basis in the following fast-food chains: Taco Bell, Kentucky Fried Chicken (KFC) and Pizza Hut, as PepsiCo owned these brands until the company divested itself of them.

Display at the Cineplex in Montreal’s Latin Quarter
As a result, sugar-sweetened beverages are regularly promoted through these partnerships. Consider, in particular, McDonald’s® deal, during the summers of 2010 and 2011, which offered all Coca-Cola® soft drinks for $1, and in any format! Both companies won from this promotion, and mutually benefitted from their respective brand image and reputation. In fact, low SSB prices increase customer traffic for McDonald’s® while Coca-Cola® sells more drinks and reinforces its emotional ties with consumers.

In this type of partnership, sugar-sweetened beverages can be used as:

- **Bait:** generally offered at a low price (see example opposite), or the consumer gets a bonus when buying a drink
- **Free offer:** generally offered free when the consumer buys something else

In any case, this type of strategy aiming for an association with another recognized brand is likely to add to the growth in consumption of sugar-sweetened beverages. These promotions are also often announced on social media, which are very popular with young people, and relayed by e-mail. Consequently, they directly reach this target population. We will look at this cross-marketing in more detail in Volume 4 on Promotion.

Faced with the extent, creativity and intensity of the marketing strategies used by the SSB industry, one might question whether Canadians can really make informed choices. In the case of prices, the techniques employed promote the affordability of the product, and can encourage people to consume large quantities. There are, however, some avenues for action that can be put in place to reduce the attractiveness of sugar-sweetened beverages.
“Pricing” Recommendations

Price undeniably influences consumer behaviour. In this volume, we have seen that sugar-sweetened beverages are very affordable. They are constantly on special offer and are at the heart of various promotional offers that use their low prices to attract consumers. In addition, some price-related marketing strategies can encourage a higher consumption of these beverages, particularly among younger people.

At a time when consumption of SSBs should be discouraged because of their impact on health, concrete actions should be considered in terms of pricing. Acting on the prices of sugar-sweetened beverages could help limit their attractiveness.

The Real Cost of Sugar-Sweetened Beverages

Although their shelf prices are very low, SSBs could have a significant impact on the economy, health-related costs and public financing in general. Seen in this light, sugar-sweetened beverages are not such great value. In the United States, for example, it has been estimated that over a 10-year period, US$82 billion was spent on medical costs due to excessive consumption of sugar-sweetened beverages (defined here as one drink a week). Corresponding data for Canada is not yet available. However, according to the most conservative estimates, obesity costs Canadian taxpayers approximately $4.3 billion per year. On the other hand, certain actuaries estimate these costs to be closer to $30 billion a year. We must also remind ourselves that the relationship between sugar-sweetened beverages and obesity is clearly documented, and sugar-sweetened beverages are therefore most likely add to health care costs in Canada.

In fact, the World Health Organization, the Yale Rudd Center for Food Policy and Obesity, the Centers for Disease Control and Prevention, the Heart and Stroke Foundation of Canada, the Childhood Obesity Foundation, the Chronic Disease Prevention Alliance of Canada and the Canadian government, among others, have identified sugar-sweetened beverages as major contributors to the current obesity epidemic. In addition to obesity, the consumption of sugar-sweetened beverages is also associated with numerous diseases such as type 2 diabetes, cardiovascular diseases, metabolic syndrome, high blood pressure and deterioration of dental health and bones. These diseases also create a high cost for Canadian society because:

- In 2000, cardiovascular diseases cost the Canadian economy more than $22.2 billion in medical services, hospital costs, lost earnings and lost productivity.
- It is estimated that by 2020, diabetes-related costs charged to the Canadian public health system will reach $19.2 billion a year.

At a time when consumption of SSBs should be discouraged because of their numerous impacts on health, concrete actions should be considered in terms of pricing. In fact, by acting on the prices of sugar-sweetened beverages, we could help limit their attractiveness. This intervention can take many forms. In order to limit competitive “unbeatable” discounts on SSBs, it could be particularly interesting to impose a minimum selling price for them. Effectively, we know that the low prices of these beverages, coupled with frequent promotions, contribute greatly to their popularity, especially among young people. This type of regulation has already been applied to beer in Quebec, “so that price does not encourage irresponsible drinking”, and to alcohol in Scotland.
However, there is one particularly promising measure that governments can implement in order to affect the accessibility of sugar-sweetened beverages: taxation with measures such as a special fee or excise duty. These have been adopted in several countries and are under discussion in many more.

**A Tax on Sugar-Sweetened Beverages: a Promising Measure**

Although obesity and chronic diseases have multiple causal factors, it is generally recognized that agri-food companies, which produce and massively promote these SSBs through omnipresent and aggressive marketing, are partially responsible for these expensive public health problems. This is also one of the reasons that motivate the imposition of a tax on this industry, like France and Hungary did last year. Such a measure would send a strong message regarding the appropriate status of these products as luxury items.

Taxation has been identified as one of the most promising and cost-effective strategy for governments by many recognized organizations and agencies, such as:
- The Institute of Medicine of the National Academies
- The Organization for Economic Cooperation and Development (OECD)
- The United Nations
- The Yale Rudd Center for Food Policy and Obesity

**A Potential Impact on the Consumption of Sugar-Sweetened Beverages and Health**

The latest data suggests that such a tax would have a twofold beneficial impact on health by helping reduce the consumption of sugar-sweetened beverages and by generating sums that could be invested in prevention and in promoting public health.

First, certain studies suggest that the tax rate adopted can have a direct impact on reducing SSB consumption. In fact, according to these models, a 10% tax on SSBs could reduce consumption by an average of 8 to 10%.

Moreover, in the United States, researchers have studied the impact on health and health spending that a nationwide 1-cent per ounce excise duty on sugar-sweetened beverages would have. Their results, published in January 2012, demonstrate that such a tax would reduce SSB consumption by 15% among adults in the 25-64 age range. They also estimate that between 2010 and 2020, the tax would prevent:
- 2.4 million cases of diabetes a year (a calculation that combines the number of diabetes sufferers with the number of years lived with the disease)
- 95,000 cases of heart disease
- 8,000 strokes
- 26,000 premature deaths
- while reducing medical costs by US$17 billion and generating US$13 billion tax revenue a year.
Significant Revenues for Prevention

The expected positive impact of a tax is also related to the generation of revenues that would allow for new investments in prevention. In fact, following the examples of alcoholic drinks and tobacco, an “excise duty” type tax could be levied on sugar-sweetened beverages and collected from manufacturers and importers, based on the number of litres produced or imported. For example, a 1-cent tax on every litre of SSB would generate revenues of at least $36 million across Canada. This simple equation can easily be multiplied by the desired level of tax, in order to obtain the potential revenue. The sums collected by such a tax on SSBs could allow for the funding of significant actions to prevent obesity and associated diseases.

Consequently, even a modest tax is viewed as one of the most promising measures if the revenue is reinvested in prevention. For this reason, and taking into account that many publications appear to favour the use of such a fiscal mechanism to prevent obesity, experts appointed by the Heart and Stroke Foundation recommend leading the way now, given the urgent need for innovative ways to prevent obesity in the present context.

International Experiences

Accordingly, many governments are discussing this measure or have already implemented a tax on SSBs. This is the case in:

- Hungary
- France
- Algeria
- Scotland
- Ireland
- many U.S. states

Among the models used, some countries prefer a behavioural tax, in the sense of a relatively high tax aimed directly at reducing the consumption of the product by significantly increasing its cost as well as investing the revenues in prevention. For example, Hungary has applied a tax equivalent to $1.25 per litre on energy drinks. As for France, it has imposed the equivalent of $0.08 per litre on sugar-sweetened beverages. Other countries have opted for a more modest targeted tax, treating the product like a luxury item. This helps create a model that encourages health while generating additional revenue to reinvest in prevention.

Strong Support from the Canadian Population

A survey conducted by Ipsos for the Weight Coalition in 2010 revealed that nearly 70% of Canadians said they agreed with levying a tax on sugar-sweetened beverages if the resulting tax revenues were invested in preventing obesity and promoting a healthy lifestyle.

According to a recent survey by Ipsos Reid for the Public Health Agency of Canada, support for a tax to combat obesity is “high,” with 4 out of 10 respondents “strongly in favour” of adding a special tax on sugar-sweetened beverages if the sums collected went to fund childhood obesity prevention programs.

Therefore, Canada’s federal, provincial and territorial governments should note and rely on the many studies, international feedback, as well as substantial popular support to impose a tax on sugar-sweetened beverages, that would be paid by their manufacturers, and the revenue from which would be reinvested in prevention and in promoting healthy lifestyles.
Appendix 1: About the Weight Coalition

The Quebec Coalition on Weight-Related Problems (Weight Coalition), an initiative sponsored by the Association pour la santé publique du Québec, seeks the required support to demand legislative and regulatory changes, as well as public policies within three strategic areas (agri-food industry, sociocultural and built environment) in order to encourage the development of environments that facilitate the access to healthy choices which will help prevent weight-related problems.

Since its creation in 2006, the Weight Coalition has become a well established advocate supported by nearly 200 partners from various spheres, such as the municipal, school, health, research, education, environment, nutrition, and physical activity arenas.

The Weight Coalition’s partners recognize the importance of taking action and support the following environmental measures:

**Agri-Food Industry:**
- The elimination of junk food and soft drinks in schools and hospitals
- A strict adherence to the food policy in elementary and high schools
- A responsible policy for food display in supermarkets
- Cooking classes in schools to promote the development of culinary skills and the pleasure of eating well
- Moderate-size servings in restaurants
- A special tax dedicated to supporting preventative measures for weight-related issues

**Built Environment:**
- A safe environment surrounding every school to allow children to walk or cycle to school
- A policy for active schools
- Agreements between municipalities and schools in order to increase the use of sports facilities after school hours
- An increase in the number of parks, green spaces, bicycle paths, and walkway systems
- Restricting the use of vehicles in certain zones
- Improving the quality and accessibility of public transportation services

**Sociocultural Environment:**
- Regulations on weight loss products, services, and methods
- Strict application of the regulations governing advertising directed at children
- Legislative measures and regulations to restrict the encroachment of advertising within public spaces
- The creation of an independent body to govern the advertising industry
- The implementation of a policy for work-family life balance to enable families to prioritize their health and well-being
Partners of the Weight Coalition

As of March 5, 2012

Partner Organizations:

- Accès transports viables
- Agence de la santé et des services sociaux de Chaudières-Appalaches
- Agence de la santé et des services sociaux de l’Estrie
- Agence de la santé et des services sociaux du Bas-St-Laurent
- Alberta Policy Coalition for Chronic Disease Prevention (APCCP)
- Anorexie et boulimie Québec (ANEB)
- Archevêché de Sherbrooke
- Association des dentistes de santé publique du Québec
- Association des jardiniers maraîchers du Québec
- Association des urbanistes et des aménagistes municipaux du Québec
- Association pour la santé publique du Québec
- Association québécoise d’établissements de santé et de services sociaux
- Ateliers Cinq Épices
- Azimut Santé
- Carrefour action municipale et famille
- Cégep de Sherbrooke
- Centre d’écologie urbaine de Montréal
- Centre de santé et de services sociaux – Institut universitaire de gériatrie de Sherbrooke
- Centre de santé et de services sociaux de Gatineau
- Centre de santé et de services sociaux de Jonquière
- Centre de santé et de services sociaux de Matane
- Centre de santé et de services sociaux de Papineau
- Centre de santé et de services sociaux de Rimouski-Neigette
- Centre de santé et de services sociaux de Rouyn-Noranda
- Centre de santé et de services sociaux de Témiscaming-et-de-Kipawa
- Centre de santé et de services sociaux des Aurores-Boréales
- Centre de santé et de services sociaux du nord de Lanaudière
- Centre de santé et de services sociaux Drummond
- Centre de santé et de services sociaux Jardins-Roussillon
- Centre d’écologie urbaine de Montréal
- Centre hospitalier de l’Université de Montréal
- Centre hospitalier universitaire de Sherbrooke
- Centre hospitalier universitaire Sainte-Justine
- Centre Normand
- Centre sportif Alphonse-Desjardins
- Chambre de commerce de Fleurimont
- Chambre de commerce de Sherbrooke
- Collège régional Champlain
- Comité Action Matapédia en Forme (CAMEF)
- Commission scolaire de la Région-de-Sherbrooke
- Commission scolaire des Phares
- Conseil québécois du loisir
• CytoKIN
• Direction de santé publique et d'évaluation de Chaudière-Appalaches
• Éclipse, Entreprise d'insertion
• Edupax
• Équilibre – Groupe d’action sur le poids
• Équipe PAS à PAS du CSSS La Pommeraie (Brome-Missisiquoi)
• Équiterre
• Fédération des éducateurs et éducatrices physiques enseignants du Québec
• Fédération des kinésiologues du Québec
• Fondation des maladies du cœur du Québec
• Fondation Lucie & André Chagnon
• Institut de Cardiologie de Montréal
• Jeunes pousses
• Kínerge inc
• La Tablée des chefs
• Le Collectif de la table des écoliers
• Municipalité de Lac-Etchemin
• Nomade entraînement
• Québec en forme
• Québec en santé – Groupe d'action pour une saine alimentation
• Regroupement des cuisines collectives du Québec
• Réseau du sport étudiant du Québec (RSEQ)
• RSEQ Cantons-de-l'Est
• RSEQ Est-du-Québec
• RSEQ Laurentides-Lanaudière
• RSEQ Mauricie
• RSEQ Montérégie
• RSEQ Québec – Chaudière-Appalaches
• RSEQ Saguenay – Lac St-Jean
• Réseau québécois de Villes et Villages en santé
• Sherbrooke Ville en santé
• Société de recherche sociale appliquée
• Société de transport de Sherbrooke
• Société de transport du Saguenay
• Sports-Québec
• Tennis Québec
• Union des municipalités du Québec
• Université de Sherbrooke
• Vélo Québec
• Ville de Baie-Saint-Paul
• Ville de Boisbriand
• Ville de Chambly
• Ville de Granby
• Ville de Joliette
• Ville de Laval
• Ville de Lévis
• Ville de Matane
• Ville de Montréal
• Ville de Rimouski
• Ville de Roberval
• Ville de Rouyn-Noranda
• Ville de Saguenay
• Ville de Saint-Georges
• Ville de Saint-Hyacinthe
• Ville de Shawinigan
• Ville de Sherbrooke
• Ville de Sorel-Tracy
• Viomax

**Individual Partners:**
- Marc Antoine, dietician-nutritionist,
- Hedwige Auguste, community health student, Université de Montréal
- Simon Bacon, Associate Professor, Concordia University
- Micheline Beaudry, retired public nutrition professor
- Annie Beaulé Destroismaisons, master’s student in nutrition, Université de Montréal
- Maryse Bédard-Allaire, special appointee for promoting healthy lifestyle, Carrefour action municipale et famille
- Murielle Béland, dental hygienist, CSSS du Grand Littoral
- Roch Bernier, MD, doctor
- Julie Bernier-Bachand, dietetic technician
- Patricia Blackburn, professor at the Department of Health Sciences, Université du Québec à Chicoutimi
- Paul Boisvert, coordinator, Chaire de recherche sur l’obésité de l’Université Laval
- Alysson Bourgault, development agent, Québec en Forme
- Thierry Bourgoignie, full professor, director of the Groupe de recherche en droit international et comparé de la consommation (GREDICC), Department of Law, Université du Québec à Montréal
- Jean-Guy Breton, consultant and former Mayor of Lac-Etchemin
- Annie Brouard, project manager, Egzakt
- Martin Brunet, physical and health educator, Commission scolaire des Patriotes
- Caroline Brutsch, nutritionist, CSSS d’Argenteuil
- Sarah Burke, public health student, Johns Hopkins University
- Ariane Cantin, student, Hôpital de la Cité de la Santé de Laval
- André Carpentier, assistant director of research – associate professor, Centre hospitalier universitaire de Sherbrooke
- John Carsley, public health physician
- Diane Chagnon, dietician-nutritionist, Université de Sherbrooke
- Jean-Philippe Chaput, junior research chair, Children’s Hospital of Eastern Ontario Research Institute
- Marie-Soleil Cloutier, teacher, Université de Montréal
- Marie-Ève Couture-Ménard, Doctoral of Law candidate, McGill University
- Mario Couture, educator
- Cécile D’Amour, retired teacher
- Émilie Dansereau-Trahan, special appointee for weight-loss products, services, and methods, Association pour la santé publique du Québec
- Jean-Marie De Koninck, professor of Mathematics, Université Laval
• Louis Delisle, directeur – fondateur, Compassion poids santé
• Marie-Christine Déry, copartner, CytoKIN
• Romain Dhouailly, educator sports medicine and health coach
• Jacinthe Dumont, officer of planning, programming, and research, Agence de la santé et de services sociaux du Saguenay – Lac St-Jean
• Louali Fatna, community health resident
• Martine Fortier, consultant health promotion, Direction de santé publique de Montréal
• Michel Fortin, teacher, Collège Durocher Saint-Lambert
• Karine Fournier, physical education teacher, Cégep de l’Outaouais
• Evelyne Gagné, student, Université Laval
• Thierry Gagnon, kinesiologist, president, Nomade entraînement
• Vincent Gagnon, teacher, École secondaire Jacques-Rousseau
• Jasmine Ghoddoussi, dietitian
• Valéry Gratton, assistant, infrastructure support and server management, Loto-Québec
• Karine Gravel, nutritionist, doctoral candidate in nutrition, Université Laval
• Assomption Hounsa, ministère de la santé du Bénin
• Louis W. Jankowski, retired, teacher of physical activity
• Marie-Claude Jean, nurse, CLSC des Patriotes
• Florence Junca-Adenot, professor of Urban and Tourism Studies, Université du Québec à Montréal
• Carl-Étienne Juneau, doctoral candidate, Université de Montréal
• Michel Lachapelle, advisor for Kino-Québec
• Véronik Lacome, performers agent and show producer
• Joseph Laevens, graduate student, master in architecture, University of Toronto
• Marie-Anne Lafontaine, nutritionist, St-Mary’s Hospital
• Marie-France Langlois, full professor, Centre hospitalier universitaire de Sherbrooke
• Catherine Larouche, director of projects and development, PremièreAction Restauration
• Richard Larouche, doctorate student in Human Kinetics, University of Ottawa
• Geneviève Lasnier, elementary teacher
• Hélène Laurendeau, nutritionist and moderator
• Camille Leduc, retired and board of directors of CSSS de la Baie-des-Chaleurs
• Bonnie Leung, nutritionist, Cree Board of Health and Social Services of James Bay
• Paul Lewis, professor, Université de Montréal
• Danielle Lizotte-Voyer, professor, Cégep de l’Outaouais
• André Marchand, officer of planning, programming, and research, Agence de la santé et des services sociaux du Saguenay – Lac St-Jean
• Richard Massé, director, École de santé publique de l’Université de Montréal
• Marie-France Meloche, nutritionist
• Stéphanie Mercier, web project manager, Egzakt
• Caroline Michaud, nutritionist
• Johane Michaud, clinical nurse in prevention, Centre de santé et de services sociaux de Thérèse-de-Blainville
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• Jean-Claude Moubarac, doctoral candidate in public health
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• Kathleen Pelletier, MD, doctor, Agence de la santé et des services sociaux du Saguenay – Lac St-Jean
• Jean Perrault, former Mayor of the city of Sherbrooke and former President of the Union des municipalités du Québec
• Vanessa Perrone, nutritionist
• Andréane Poliquin, communications advisor, Québec en Forme
• Samuel Pothier, political science and communication student
• Marie-Ève Pronovost, nurse, health service, Cégep de Saint-Félicien
• Lise Roche, advisor
• Alain Rochefort, webmaster
• Claudia Rousseau, serveuse, restaurant Chez oeufs
• Mathieu Roy, doctoral candidate in public health, Université de Montréal
• Manon Sabourin, dental hygienist, Conseil Cri de santé et des services sociaux de la Baie James
• Martin Sénéchal, doctorate student, Université de Sherbrooke
• Dominique Sorel, engineer
• Rafael Murillo Sterling, president, Gym Social Inc.
• Chantal St-Pierre, accompanying school health, CSSS de l’Énergie
• Laurent Teasdale, kinesiologist, Orange Santé
• Jacques Émile Tellier, consultant, Entreprises Multi-Services Inc.
• Sabine Tilly, Founder, ZEN BALANCE « mon équilibre »
• François Thibault, applications specialist, Kontron Canada
• Sherry Thithart, research manager, Alberta University
• Geneviève Tremblay, planning, programming and research officer, Agence de la santé et des services sociaux de l’Abitibi-Témiscamingue
• Helena Urfer, communications manager, École de santé publique, Université de Montréal
• Gabrielle Voyer, criminology student
Appendix 2: About the Innovation Strategy (IS)

The Innovation Strategy of the Public Health Agency of Canada focuses on innovation and learning in population health interventions to reduce health inequalities in Canada and effectively address priority public health problems and their underlying factors.

The Innovation Strategy puts a strong focus on the exchange and use of practical knowledge — based on the results of these interventions — and sharing of best or promising practices across the country.

The Innovation Strategy supports:
- The development, adaptation, implementation, and evaluation of promising, innovative population health interventions and initiatives in various settings and populations in Canada.
- Knowledge translation and dissemination based on the systematic collection of results and outcomes of these interventions and promotion of their use across Canada.

Each Innovation Strategy solicitation addresses a specific priority public health issue. A first cycle launched in June 2009 focused on mental health promotion called, “Equipping Canadians – Mental Health throughout Life”. In May 2010, a second cycle was launched focused on a new theme: “Achieving Healthier Weights in Canada’s Communities”; and, “Managing Obesity across the Life-Cycle: An Interventions Approach” launched in August 2010. Each solicitation has two phases: a developmental phase and a full implementation phase.

The main objective of the first cycle, “Equipping Canadians – Mental Health throughout Life” is to support more effective action on the underlying protective factors, conditions and skills that enhance long term mental health. The Strategy funds interventions targeting underlying determinants and protective factors among populations at higher risk due to environmental, social, demographic and / or economic factors with a focus on children, youth and families.

The main objective of the second cycle is to develop and implement more effective action on the underlying factors, conditions and skills that enable individuals and create supportive environments.

“Achieving Healthier Weights in Canada’s Communities” focuses on the promotion of healthy weights, prevention of overweight and obesity, and attainment and maintenance of healthy weights, using a population health approach with an emphasis on actions that will contribute to the reduction of health inequalities. “Managing Obesity across the Life-Cycle: An Interventions Approach” focuses on improving outcomes and reducing complications among Canadians who have been identified as obese and providing supports to Canadians who are overweight to prevent obesity.

For more information, please visit the following website:
Appendix 3: About the Project Partners

The project entitled “A Multidimensional Approach to Reducing the Appeal of Sugar-Sweetened Beverages (SSBs)” was launched by the Association pour la santé publique du Québec (ASPQ) and the Quebec Coalition on Weight-Related Problems (Weight Coalition) as part of the 2010 Innovation Strategy of the Public Health Agency of Canada on the theme of “Achieving Healthier Weights in Canada’s Communities”. This project is based on a major pan-Canadian partnership involving the following organizations.

Since 1988, the Réseau du sport étudiant du Québec (RSEQ) has been a leader in the development of sport and physical activity and is recognized as an innovator in the field in Quebec. The RSEQ is committed to the promotion and development of sport and physical activity in an educational setting from the grassroots level through to high performance sport. The RSEQ promotes the education and academic success as well as the health and well being of young people. Over the past decade, RSEQ has developed and implemented several programs promoting healthy lifestyles including the iGetit.ca program that was introduced to high schools across the province in January 2011 via the NewDrive contest (Moncarburant.ca).

Fédération du sport francophone de l’Alberta (FSFA) has the mission to promote and provide access to sports and wellness programs for French and French-speaking Albertans of all ages. By providing French-language access to programs and services in the fields of sports, physical activity and well-being, the FSFA aims at the development of an active lifestyle and healthy eating habits among young people and adults that are French speaking or of French expression in Alberta.

Université Laval, the first Francophone university in the Americas, offers a unique research environment. It is one of the top 10 research universities in Canada and has an overall annual budget of about $700 million. Université Laval has 17 faculties that cover every knowledge area, including the Faculty of Agriculture and Food Sciences. With its 20 chairs and research groups and its institute, this Faculty is at the forefront of its field. Through its research projects and activities, it affects all aspects of the bio-food chain. Moreover, its institute, the Institute of Nutraceuticals and Functional Foods (Institut des nutraceutiques et des aliments or INAF) is the largest group of researchers in Canada to dedicate its entire research program to the complex interactions between food, food components, nutrition and health. INAF’s research focuses on health targets that are major challenges for many developed countries that have a direct relationship with food. Accordingly, the Institute’s efforts aim to prevent, through nutrition, major chronic illnesses such as obesity, diabetes and cardiovascular disease. The research of many INAF researchers center on human nutrition and the development of new clinical practices and public health to promote healthy and sustainable eating habits.
The **Social Research Demonstration Corporation** (SRDC) is a non-profit social policy research organization and a leader in the field of social experimentation. SRDC’s mission is two-fold: 1) to help policy-makers and practitioners identify social policies and programs that improve the well-being of all Canadians, with a special concern for the effects on the disadvantaged, and 2) to raise the standards of evidence used in assessing social policies and programs. Since 1991, SRDC has been building a base of knowledge and experience in social policy about what works and what does not work, determining the genuine effectiveness of new program interventions before their full-scale adoption, using the most rigorous evaluation approaches appropriate to any given research question. SRDC brings particular expertise in the evaluation of population health interventions. Among other work, SRDC completed the evaluation of the Sip Smart! program in British Columbia for the Michael Smith Foundation and the BC Healthy Living Alliance.

The **Public Health Association of British Columbia** (PHABC) is a voluntary, non-profit, non-government organization founded in 1953. PHABC was incorporated as a non-profit society in 1980 and operates under the Societies Act. The organization is a provincial affiliate of the Canadian Public Health Association (CPHA). PHABC maintains a membership of approximately 500 public health professionals and other stakeholders from both urban and rural areas across British Columbia. It promotes and protects the public’s health by actively working to advance the development and implementation of healthy public policy, encourage and facilitate research into the broad issues that affect the public’s health, and cooperates regionally, nationally and internationally with other organizations to promote health. It is joined in its mandate to the Canadian Public Health Association and other provincial and territorial branch organizations. This national linkage enables PHABC to participate in dialogue and act on matters of interest to provincial and national public health. The stability of the PHABC makes it a low risk for funding and granting agencies and demonstrates the viability of the Association to act for the common good over an extended period of time. The Association has considerable experience with coalition building, community development, health informatics, initiatives focused on addressing the determinants of health, strategic planning, policy development, research, survey design and evaluation and conducting studies to synthesize information for policy and action on public health issues.

The mission of the **Ontario Public Health Association** (OPHA) is to provide leadership on issues affecting the public’s health and to strengthen the impact of people who are active in public and community health throughout Ontario. OPHA achieves its mission by providing education opportunities and up-to-date information in community and public health, access to local, provincial and multi-disciplinary community health networks, mechanisms to seek and discuss issues and views of members, issue identification and advocacy with a province-wide perspective, and expertise and consultation in public and community health.


3 NPLAN (National Policy & Legal Analysis Network to prevent childhood obesity) (2011): “Sugar-Sweetened Beverage” means any nonalcoholic beverage, carbonated or noncarbonated, which is intended for human consumption and contains any added Caloric Sweetener. As used in this definition, “nonalcoholic beverage” means any beverage that contains less than one-half of one percent alcohol per volume. Consulted on September 16, 2011 at http://www.phlpnet.org/sites/phlpnet.org/files/SSB_Tax_Legislation_v2.0_FINAL_20110607..pdf

4 Bureau de soutien à la communication en santé publique (2009): « On désigne par « boisson sucrée » toute boisson dans laquelle du sucre a été ajouté, principalement les boissons gazeuses ordinaires (non diètes), les boissons aux fruits (punchs, cocktails), les boissons énergétiques pour sportifs (Gatorade, Powerade, etc.) et les boissons énergisantes sucrées (Red Bull, Guru, etc.). Naturellement sucrés, les jus ne sont pas inclus dans cette catégorie ». Consulted on October 4, 2011 at http://www.espacecom.qc.ca/communiquer/fiches-thematiques/Les-jeunes-et-les-boissons-sucrees.aspx


6 Definition given by the Canadian Government: “Sugar-sweetened beverages in this context are defined as liquids that are sweetened with various forms of sugars (monosaccharides and/or disaccharides) that add calories. These beverages include, but are not limited to fruit flavoured drinks, soft drinks, sports and energy drinks, and sweetened hot or cold drinks.” Consulted on September 23, 2011 at http://www.healthycanadians.gc.ca/init/kids-enfants/obesit/index-eng.php


47 Kapferer (1985)


75 Data source: Statistics Canada. Food and other selected items, average retail prices (monthly)


110 Consulted March 7, 2012 at [http://www.formulaire.gouv.qc.ca/cgi/affiche_doc.cgi?dossier=2724&table=0](http://www.formulaire.gouv.qc.ca/cgi/affiche_doc.cgi?dossier=2724&table=0)


114 Directorate for Employment, Labour and Social Affairs (2010). *Obesity and the Economics of Prevention: Fit not Fat - Canada Key Facts*. Consulted on July 13, 2011 at [http://www.oecd.org/document/59/0,3746,en_2649_33929_46038670_1_1_1_1,00.html](http://www.oecd.org/document/59/0,3746,en_2649_33929_46038670_1_1_1_1,00.html)


121 Ipsos Reid for the Public Health Agency of Canada (2011). *Perceptions et appui des Canadiens à l’égard de mesures possibles pour prévenir et réduire l’obésité chez les enfants*. 

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