# Quantifying stakeholder interactions with government related to Bill S-228 and marketing to kids in Canada

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#### **Abstract**

**Background:** In 2016, Canadian federal restrictions on food and beverage marketing to children (M2K) were proposed as Bill S-228, the *Child Health Protection Act*. In 2019, the Bill died on the parliamentary table. This study aimed to quantify interactions related to Bill S-228 and M2K, and the type of stakeholders and government institutions involved.

**Methods:** Two sources of data on the interactions between stakeholders and government officials related to M2K and Bill S-228 (2016/09/01 – 2019/09/30) were analyzed: 1) the Meetings and Correspondence on Healthy Eating (MCHE) database, detailing interactions between stakeholders and Health Canada related to nutrition policies; 2) Canada's Registry of Lobbyists, reporting activities of paid lobbyists. Interactions were categorized by stakeholder type (industry/non-industry). The number and type of communications with different government institutions and designated public office holders were analyzed.

**Results:** 139 MCHE meetings, 65 lobbying registrants, 215 lobbying registrations and 3418 communications related to M2K and Bill S-228 were analyzed. More than 80% of all interactions were from industry stakeholders: 84% of MCHE meetings and >82% of lobbying registrants, lobbying registrations and communications were from industry. Overall, industry lobbyists had five-fold more communications than non-industry (2866 vs. 552).

Interpretation: Industry stakeholders interacted with government officials more often, more broadly, and with offices of higher power than non-industry stakeholders on subjects related to M2K and Bill S-228. While further research is needed to elucidate the nature of the discourse around M2K, it is apparent that while Bill S-228 was on the parliamentary table, industry viewpoints were more prominent than those of non-industry stakeholders.

### Introduction

Marketing unhealthy food products to children (M2K) has been identified as an important factor in influencing children's dietary habits and preferences, with consequences for childhood overweight and obesity (1). To help mitigate these effects, Bill S-228, the *Child Health Protection Act* was proposed in the Canadian Senate in September 2016, aiming to federally restrict M2K (2). This proposal was supported by Health Canada's *Healthy Eating Strategy*, a suite of nutrition-related policies aimed at making the healthier choice the easier choice for Canadians (3). In parallel to Bill S-228's progress through parliament, Health Canada was developing regulations for the application of the Bill, and a strategy for monitoring the Bill's impact (4). The details of Bill S-228's parliamentary progress and Health Canada's regulatory development process are shown in **Figure 1**. In September 2019, the Bill died on the parliamentary table prior to the federal election (5, 6), despite seemingly strong support from parliamentarians and the public and an apparent policy window (window of opportunity for policy change) (7, 8). Following his re-election, Prime Minister Justin Trudeau identified M2K restrictions as a public health priority for Canada in his Mandate Letter to the Minister of Health (published late in 2019), suggesting the potential opening of another M2K policy window (9).

The development of nutrition-related policies is influenced by many factors, such as scientific evidence, stakeholder interactions, public support and political will (10, 11). Stakeholders employ powerful strategies – not dissimilar to those of the tobacco industry – to influence policymakers, and understanding these influences can be critical to the development of unbiased nutrition policies (12-16). Canadian research has shown that industry stakeholders are actively attempting to influence the nutrition-related policies articulated in the *Healthy Eating Strategy* (12). However, the extent to which stakeholders influenced the development of Canadian M2K restrictions, specifically, is unknown. With the reprioritization of M2K restrictions occurring so closely after Bill S-228, as stated in a Canadian Medical Association Journal commentary: "how this Bill came to die, despite overwhelming support for it, is worthy for attention if we are to protect the health of Canadian children in the future" (6). Understanding

the influence of different stakeholders during Bill S-228's policy window will help elucidate reasons for the Bill's failure and support the development of new restrictions (6). The objective of this study was to quantify the meetings, correspondence and lobbying that occurred related to M2K and Bill S-228, as well as the type of stakeholders and government institutions involved.

### Methods

This study presents a quantitative analysis of two sources of data on the interactions that occurred between stakeholders and government officials related to M2K and Bill S-228 during its policy window, between September 2016 and September 2019.

1. Health Canada's Meetings and Correspondence on Healthy Eating (MCHE) database

The MCHE database was developed as part of the Government of Canada's Regulatory Transparency and Openness Framework (17, 18). The MCHE contains detailed information on the nature and content of all meetings, correspondence and documents (hereafter referred to as "meetings") that were shared between stakeholders and Health Canada related to the *Healthy Eating Strategy*, including the development of M2K restrictions (i.e., Bill S-228) (18). Meetings between Health Canada and other levels of Canadian or foreign government and individuals or experts representing themselves are excluded from this database (18). The MCHE database was searched in September 2019 and documents from meetings labelled by Health Canada with the subject "marketing to kids" were extracted. French duplicates were removed. From the downloaded files, stakeholder name, type of meeting (i.e., stakeholder- or Health Canada-initiated) and the Health Canada Office involved were extracted. As per research by Vandenbrink et al., stakeholder type was assigned to all meetings as either "industry" (i.e., any organization which could have a commercial interest, e.g., food companies, advertising companies, industry association), "non-industry" (i.e., any organization with no commercial interest, e.g., public health or not-for-profit organizations), or "mixed" (i.e., meetings with industry and non-industry stakeholders together, or unspecified stakeholders) (12). The number and proportion of meetings were calculated per stakeholder type (i.e., industry, non-

industry or mixed), per meeting type (i.e., stakeholder- or Health Canada-initiated), and per Health Canada Office involved (e.g., Deputy Minister's Office).

# 2. The Office of the Commissioner of Lobbying's Registry of Lobbyists

The Office of the Commissioner of Lobbying's Registry of Lobbyists contains information on the activities of all paid lobbyists in Canada (19). Lobbyists employed by government relations firms (i.e., consultant lobbyists) must register all of their lobbying activities, while lobbyists communicating on behalf of their employer (i.e., in-house lobbyists) must only register if their lobbying activities make up >20% of monthly duties (20). Volunteers and individuals lobbying on their own behalf need not register (20). The Registry of Lobbyists is publicly available in an online database and for download on the Open Data website (19, 21). Available data include: 1) Lobbying Registrations—information on every paid individual who registered to communicate with government officials on a certain topic, and 2) Monthly Communication Reports—reporting basic details about the communications that occurred between lobbyists and Designated Public Office Holders (DPOH) (21). Unlike in the MCHE, the contents of these communications are not disclosed. All Lobbying Registrations and Monthly Communication Reports files were downloaded on January 24, 2020.

Lobbying Registrations data were analyzed for registrations that occurred between September 1, 2016 and September 30, 2019, representing the approximate policy window of Bill S-228. The Subject Matter Details of registrations that occurred during this time period were searched for topics related to Bill S-228 or M2K using several keyword searches (e.g., "marketing to kids", "Bill S-228", "advertising restrictions", etc.). The keywords were cross-checked with the Subject Matter Details in the online Registry to ensure that all appropriate terms were captured. From the lobbying registrations found to be related to M2K and Bill S-228, registrant ID number, the registrant's name, and the name of the client, organization or corporation they represented were extracted. Stakeholder type (i.e., industry or non-industry) was assigned to each registration based on the client represented.

From the Monthly Communication Reports data, all communications registered from September 1, 2016 to September 30, 2019 associated with the previously identified registrant ID numbers were extracted. From these communications, the name, position title, branch unit and government institution of the DPOHs that lobbyists met with were determined. For government institutions representing 1% or greater of all communications, the DPOH with whom a stakeholder communicated was categorized based on the individual's role or position in government, using their registered position title and branch unit (Table 1). The number of individual lobbying registrants and unique registrations were calculated by stakeholder type, as well as the number of communications that were reported by each individual registrant. The number of communications per government institution and per DPOH category were calculated by stakeholder type.

### **Results**

In total, 84.2% of meetings (n=117) related to M2K from the MCHE were from industry stakeholders, 13.7% (n=19) from non-industry stakeholders and 2.2% (n=3) from mixed stakeholders (**Table 2**). Stakeholders initiated 73.4% of all meetings; 81.2% of industry meetings versus 36.8% of non-industry meetings were stakeholder-initiated.

Overall, stakeholders most often met with the Assistant Deputy Minister's Office (ADM) (n=51 meetings) and the Director General of the Food Directorate's Office (n=48) at Health Canada (**Table 3**). More than 65% of meetings in any Health Canada office (aside from n=1 non-industry meeting in the Director General of the Office of Nutrition Policy and Promotion's office) were with industry, with 100% of meetings in the Deputy Minister's (DM) Office and 88.2% of meetings in the ADM's office being with industry.

In total, there were 65 individual lobbying registrants and 215 lobbying registrations with subject matters related to M2K or Bill S-228, and 3418 communications between these registrants and DPOHs during Bill S-228's policy window (**Table 4**). Lobbyists representing industry were responsible for 81.5%

(n=53) of registrants, 83.3% (n=179) of registrations, and 83.9% (n=2866) of communications. The mean number of communications per registrant was similar between industry (54.1 communications) and non-industry (46.0) lobbyists.

Overall, among government institutions that accounted for >1% of all communications, industry stakeholders were responsible for 60-100% of all communications with that institution (**Table 5**). The House of Commons was the government institution most often communicated with overall (n=1226, 35.9% of all communications) and by both industry (n=905, 31.6% of industry communications) and non-industry lobbyists (n=321, 58.2% of non-industry communications). The next most-communicated-with institutions were Agriculture and Agri Foods Canada (n=322, 11.2% of industry communications) and Innovation, Science and Economic Development Canada (n=316, 11.0%) for industry lobbyists, and the Senate of Canada (n=90, 16.3% of non-industry communications) and Health Canada (n=60, 10.9%) for non-industry lobbyists.

Across all lobbyists, 78.3% (n=2519) of communications occurred with parliamentarians and their staff, versus 21.7% (n=699) occurring with civil servants and their staff, with the highest proportion of communications occurring with Members of Parliament (MPs), Senators and their staff (42.6%) (**Table 6**). Industry lobbyists had 75.3% (n=2026) of their communications with Parliamentarians and 24.7% (n=663) with civil servants, whereas non-industry lobbyists had 93.2% (n=493) of their communications with parliamentarians and 6.8% (n=36) with civil servants. More than 70% of all communications in any DPOH category were from industry lobbyists.

## Interpretation

The vast majority of MCHE meetings were by industry (>84%) and most lobbying registrants, lobbying registrations and communications were from industry (>82%). Overall, industry lobbyists had five-fold more communications than non-industry lobbyists (2866 vs. 552), and at least 10-fold more

communications with the governmental offices of highest power. The results of this study indicate that industry stakeholders were by far the most active communicators and lobbyists on topics related to M2K and Bill S-228 during its policy window – results which have not been previously quantified in the scientific literature.

Research has shown that decision-makers are affected by information overload, meaning that in cases like Bill S-228, where one type of stakeholder is disproportionally interacting with all levels of government, their views may have a stronger influence on the policy outcome (10). While this study found that non-industry stakeholders initiated many meetings and interactions related to M2K, their contribution to the overall policy discourse was much less than industry counterparts. Moreover, compared to an earlier analysis of the *Healthy Eating Strategy* as a whole, where 56% of meetings were from industry stakeholders (12), our results showed that for policy discourse related to Canadian M2K restrictions specifically, more than 80% of all meetings and communications with government were from industry. Overall, stakeholder interactions related to M2K policy were particularly one-sided.

This study found that industry stakeholders were meeting more broadly across government institutions, and with more powerful offices than non-industry stakeholders. More than 90% of communications with the Prime Minister's Office, with Ministers, Parliamentary Secretaries, DMs and ADMs (i.e., the highest levels of government) were with industry lobbyists, and 100% of MCHE meetings in the Health Canada DM's office were with industry. Results suggest that certain government institutions and high-level DPOH's were exposed almost exclusively to industry-influenced messaging related to Bill S-228. Research has indicated that industry stakeholders are often at an advantage in terms of influencing nutrition policy due to many strong, direct relationships with decision-makers, whereas the voices of nutrition and public health professionals often become diluted by the increasing volume and quantity of readily-available nutrition information from industry and other sources, limiting non-industry stakeholders' impact on policy change (10, 22). Pressure from industry and the limited resources (e.g.,

funds for lobbying activities) of non-industry stakeholders have been noted as barriers to nutrition policy change (11), and based on the results of this study, this may have been the case for Bill S-228.

Further qualitative analysis of the nature of the discourse around M2K and Bill S-228 from different stakeholders could provide a clearer understanding of the Bill's eventual outcome. Such an analysis is highly feasible using the MCHE database, given that the contents of all meetings and correspondence are publicly available. The Registry of Lobbyists, however, does not disclose the contents of the communications between lobbyists and public office holders, and therefore does not facilitate qualitative analysis. Given the sheer quantity of communications that occurred from lobbyists registered related to M2K or Bill S-228 (3418 communications, 25 times more than the 139 interactions recorded in the MCHE), the inclusion of the Registry of Lobbyists under the Openness and Transparency Framework (like the MCHE), as well as other departments beyond Health Canada, would provide researchers and regulators with deeper insight into all the discourse that occurred around Bill S-228 than is possible using data from only the Health Canada MCHE database. Further elucidation of the potential reasons for Bill S-228's failure will be crucial to ensuring the successful implementation of future M2K restrictions in Canada.

This study provides novel quantitative data on stakeholder interactions related to M2K in Canada, however, there are some limitations to this analysis, inherent to the nature of the publicly available data. Firstly, the MCHE and Registry of Lobbyists exclude interactions between Health Canada and individuals or experts representing themselves (e.g., academic experts) and thus were not included in this analysis. Secondly, the Registry of Lobbyists does not include activities from volunteers, or from corporations and non-for-profit organizations where actions of in-house lobbyists form a small portion (<20%) of duties (20). Such interactions were therefore not included in this analysis but may have impacted the outcome of Bill S-228. Furthermore, lobbyists may have registered under broad subject matter terms such as "healthy eating" or "nutrition" and used these meetings to speak about M2K or Bill S-228. Therefore, our analyses

likely underestimate the number of lobbying registrations or communications that took place on these topics. Additionally, lobbyists often register with multiple subject matters per registration, and given that the specific contents of lobbying communications are unavailable, we are unable to estimate the number of communications that took place specifically related to M2K or Bill S-228 and are limited to analyses of communications that occurred by lobbyists who registered on these subject matters, without knowing the exact details of their communications. Increasing the openness and transparency of the Registry of Lobbyists would reduce this limitation.

Overall, the results of this study highlight that industry stakeholders interacted with government officials more often, more broadly, and with offices of higher power than non-industry stakeholders on subjects related to M2K and Bill S-228. While further research is needed to elucidate the nature of the discourse around M2K from the various stakeholder communications, continued efforts are also needed to broaden the openness and transparency of stakeholder interactions occurring in more government departments and in the Registry of Lobbyists. Regardless, it is apparent that industry viewpoints were more prominent than those of non-industry stakeholders during Bill S-228's policy window.

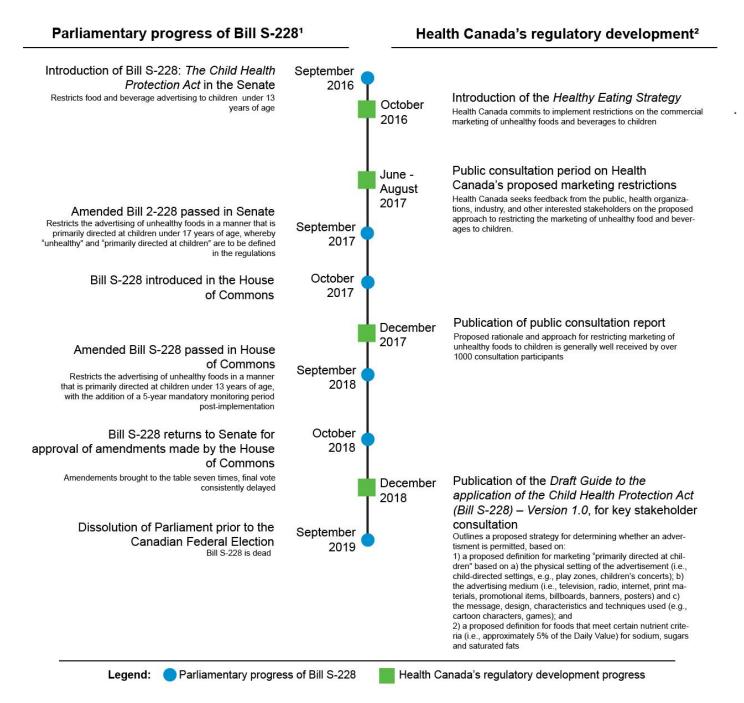
### References

- 1. World Cancer Research Fund International. Building Momentum: lessons on implementing robust restrictions of food and non-alcoholic beverage marketing to children. 2020 [Available from: <a href="https://www.wcrf.org/buildingmomentum">www.wcrf.org/buildingmomentum</a>.
- 2. Senate of Canada. Bill S-228: An Act to amend the Food and Drugs Act (prohibiting food and beverage marketing directed at children) As passed in Senate September, 28, 2017 [First Session, Forty-second Parliament, 64-65-66 Elizabeth II, 2015-2016-2017:[Available from: <a href="http://www.parl.ca/DocumentViewer/en/42-1/bill/S-228/third-reading">http://www.parl.ca/DocumentViewer/en/42-1/bill/S-228/third-reading</a>.
- 3. Health Canada. Healthy Eating Strategy 2016 [Available from: <a href="http://healthycanadians.gc.ca/publications/eating-nutrition/healthy-eating-strategy-canada-strategie-saine-alimentation/index-eng.php">http://healthycanadians.gc.ca/publications/eating-nutrition/healthy-eating-strategy-canada-strategie-saine-alimentation/index-eng.php</a>.
- 4. Health Canada. Toward restricting unhealthy food and beverage marketing to children: discussion paper for public consultation 2017 [Available from: <a href="https://s3.ca-central-1.amazonaws.com/ehq-production-">https://s3.ca-central-1.amazonaws.com/ehq-production-</a>
- canada/documents/attachments/9bced5c3821050c708407be04b299ac6ad286e47/000/006/633/original/Restricting Marketing to Children.pdf.
- 5. Health Canada. Consultation Report: Restricting Marketing of Unhealthy Food and Beverages to Children in Canada 2017 [Available from: <a href="https://www.canada.ca/en/health-canada/services/publications/food-nutrition/restricting-marketing-to-kids-what-we-heard.html">https://www.canada.ca/en/health-canada/services/publications/food-nutrition/restricting-marketing-to-kids-what-we-heard.html</a>.
- 6. Campbell NR, Greene Raine N. The Child Health Protection Act: advocacy must continue. Canadian Medical Association Journal. 2019;191(38):E1040-E1.
- 7. Guldbrandsson K, Fossum B. An exploration of the theoretical concepts policy windows and policy entrepreneurs at the Swedish public health arena. Health promotion international. 2009;24(4):434-44.
- 8. Kingdon JW, Stano E. Agendas, alternatives, and public policies: Little, Brown Boston; 1984.
- 9. Trudeau J. Minister of Health Mandate Letter 2019 [Available from: https://pm.gc.ca/en/mandate-letters/minister-health-mandate-letter.
- 10. Cullerton K, Donnet T, Lee A, Gallegos D. Effective advocacy strategies for influencing government nutrition policy: a conceptual model. International Journal of Behavioral Nutrition and Physical Activity. 2018;15(1):83.
- 11. Cullerton K, Donnet T, Lee A, Gallegos D. Playing the policy game: a review of the barriers to and enablers of nutrition policy change. Public health nutrition. 2016;19(14):2643-53.
- 12. Vandenbrink D, Pauzé E, Potvin Kent M. Strategies used by the Canadian food and beverage industry to influence food and nutrition policies. International Journal of Behavioral Nutrition and Physical Activity. 2020;17(1):3.
- 13. Mialon M, Swinburn B, Allender S, Sacks G. Systematic examination of publicly-available information reveals the diverse and extensive corporate political activity of the food industry in Australia. BMC public health. 2016;16(1):283.
- 14. Mialon M, Swinburn B, Wate J, Tukana I, Sacks G. Analysis of the corporate political activity of major food industry actors in Fiji. Globalization and Health. 2016;12(1):18.
- 15. Moodie AR. What public health practitioners need to know about unhealthy industry tactics. American Public Health Association; 2017.
- 16. Brownell KD, Warner KE. The perils of ignoring history: Big Tobacco played dirty and millions died. How similar is Big Food? The Milbank Quarterly. 2009;87(1):259-94.
- 17. Government of Canada. Regulatory transparency and openness 2019 [Available from: <a href="https://www.canada.ca/en/health-canada/corporate/transparency/regulatory-transparency-and-openness.html">https://www.canada.ca/en/health-canada/corporate/transparency/regulatory-transparency-and-openness.html</a>.
- 18. Government of Canada. Meetings and correspondence on healthy eating 2020 [Available from: <a href="https://www.canada.ca/en/services/health/campaigns/vision-healthy-canada/healthy-eating/meetings-correspondence.html">https://www.canada.ca/en/services/health/campaigns/vision-healthy-canada/healthy-eating/meetings-correspondence.html</a>.

- 19. Office of the Commissioner of Lobbying of Canada. Registry of lobbyists 2019 [Available from: https://lobbycanada.gc.ca/eic/site/012.nsf/eng/h 00000.html.
- 20. Office of the Commissioner of Lobbying of Canada. Ten Things You Should Know About Lobbying: A Practical Guide for Federal Office Holders 2012 [Available from: https://lobbycanada.gc.ca/eic/site/012.nsf/eng/00403.html.
- 21. Office of the Commissioner of Lobbying of Canada. Open Data Office of the Commissioner of Lobbying 2018 [Available from: <a href="https://lobbycanada.gc.ca/eic/site/012.nsf/eng/h\_00872.html">https://lobbycanada.gc.ca/eic/site/012.nsf/eng/h\_00872.html</a>.
- 22. Cullerton K, Donnet T, Lee A, Gallegos D. Exploring power and influence in nutrition policy in Australia. Obesity Reviews. 2016;17(12):1218-25.



Figure 1. Timeline of policy events for Bill S-228: *The Child Health Protection Act* and the development of Health Canada's proposed related regulations



<sup>&</sup>lt;sup>1</sup> Parliament of Canada. Senate Public Bill S-228: An Act to amend the Food and Drugs Act (prohibiting food and beverage marketing directed at children) - Status of the Bill 2019 (URL: <a href="https://www.parl.ca/LEGISinfo/BillDetails.aspx?billId=8439397&Language=E">https://www.parl.ca/LEGISinfo/BillDetails.aspx?billId=8439397&Language=E</a>); <sup>2</sup> Health Canada. Consultation Report: Restricting Marketing of Unhealthy Food and Beverages to Children in Canada 2017 (URL: <a href="https://www.canada.ca/en/health-canada/services/publications/food-nutrition/restricting-marketing-to-kids-what-we-heard.html">https://www.canada.ca/en/health-canada/services/publications/food-nutrition/restricting-marketing-to-kids-what-we-heard.html</a>.)

Table 1. Designated Public Office Holder (DPOH) categories, descriptions and examples

	esignated Public Office Holder POH) Category	Category Description and Examples							
1)	Parliamentarians & their staff	Elected individuals, or individuals designated by the Prime Minister for that Parliamentary term, and staff working for those individuals, responsible to the political party in power							
	a) Prime Minister's Office (PMO)	<ul> <li>Prime Minister Justin Trudeau</li> <li>Any persons registered with PMO as their government institution (e.g., directors, chiefs, policy advisors, etc.)</li> </ul>							
	b) Ministers & Parliamentary Secretaries	<ul> <li>Ministers (i.e., the political leader of a government department, e.g., Minister of Health, Minister of Finance)</li> <li>Parliamentary Secretaries (i.e., politicians serving as the link between parliamentarians and ministers and assisting senior ministers in their roles)</li> </ul>							
	c) Ministerial Staff	- Any persons working directly for a minister or parliamentary secretary (i.e. any individual registered with the branch unit "Minister's office"; e.g., chief of staff to the minister, director of parliamentary affairs, policy advisor to the minister, executive assistant to the minister, etc.)							
	d) Members of Parliament (MP), Senators & their staff	<ul> <li>Members of Parliament</li> <li>Senators</li> <li>Any persons registered with the House of Commons or the Senate of Canada as their government institution (e.g., director of parliamentary affairs, policy advisors to MPs, parliamentary assistants, member's assistant, etc.)</li> </ul>							
2)	Civil servants	Non-political staff (i.e., non-elected), responsible to the state (i.e., Canada) and not to the political party in power							
	a) Privy Council Office (PCO)	- Any persons registered with the PCO as their government institution (i.e., senior civil servants who provide direct, non-partisan support and advice to the PMO, ministries and government leadership, e.g., director of policy, assistant secretary, deputy secretary, policy advisors, etc.)							
	b) Deputy Ministers (DM)	- DMs (i.e., senior civil servant who is the functional head of a government department (e.g., Health Canada), reporting to the Minister or political lead of the department) including acting and associate DMs							
	c) Assistant Deputy Ministers (ADM)	- ADMs (i.e., senior civil servant who is the functional head of a branch within a government department, e.g., the Health Products and Food Branch within Health Canada), reporting to the Deputy Minister, including acting and associate ADMs							
	d) Other government officials	- Any civil servant registered with one of the government institutions other than the House of Commons or the Senate of Canada (e.g., Agriculture and Agri-Food Canada, Health Canada, e.g., directors, chiefs, advisors, policy advisors, chairpersons, analysts, commissioners, secretary generals, economists, special assistants, etc.)							

Table 2. Meetings<sup>1</sup> related to marketing to kids from the Health Canada Meetings and Correspondence on Health Eating (MCHE) database, summarized by stakeholder type

	All Stakeholders			dustry Stakeho	olders	Non-Industry Stakeholders			Mixed Stakeholders <sup>2</sup>		
Meeting Type	Number of meetings	% of total meetings	Number of meetings	% of stakeholder meetings	% of meetings by type	Number of meetings	% of stakeholder meetings	% of meetings by type	Number of meetings	% of stakeholder meetings	% of meetings by type
All Meetings	139	100.0	117	100.0	84.2	19	100.0	13.7	3	100.0	2.2
Stakeholder- Initiated Meetings	102	73.4	95	81.2	93.1	7	36.8	6.9	0	0.0	0.0
Health Canada- Initiated Meetings	37	26.6	22	18.8	59.5	12	63.2	32.4	3	100.0	8.1

<sup>&</sup>lt;sup>1</sup> The term "meetings" refers to any meetings, correspondence or documents in the MCHE labelled with the subject "marketing to kids"; <sup>2</sup> Meetings were categorized as being from "mixed stakeholders" if they were meetings with industry and non-industry stakeholders together, or the stakeholder was unspecified

Table 3. Meetings<sup>1</sup> related to marketing to kids from the Health Canada Meetings and Correspondence on Health Eating (MCHE) database, summarized by stakeholder type and the Health Canada Office involved

	All Stakeholders	Indus	Industry Stakeholders Non-Industry Stakeholders					Mixed Stakeholders <sup>2</sup>			
	Number of meetings	Number of meetings	% of stakeholder meetings	% of meetings by office	Number of meetings	% of stakeholder meetings	% of meetings by office	Number of meetings	% of stakeholder meetings	% of meetings by office	
All Offices	139	117	100.0	84.2	19	100.0	13.7	3	100.0	2.2	
Deputy Minister's (DM) Office	16	16	13.7	100.0	0	0.0	0.0	0	0.0	0.0	
Assistant Deputy Minister's (ADM) Office	51	45	38.5	88.2	6	31.6	11.8	0	0.0	0.0	
Director General's Office, Food Directorate	48	40	34.2	83.3	6	31.6	12.5	2	66.7	4.2	
Director General's Office, Office of Nutrition Policy and Promotion (ONPP)	1	0	0.0	0.0	1	5.3	100.0	0	0.0	0.0	
Food Directorate	20	13	11.1	65.0	5	26.3	25.0	2	66.7	10.0	
Office of Nutrition Policy and Promotion (ONPP)	3	2	1.7	66.7	1	5.3	33.3	0	0.0	0.0	

<sup>&</sup>lt;sup>1</sup> The term "meetings" refers to any meetings, correspondence or documents in the MCHE labelled with the subject "marketing to kids"; <sup>2</sup> Meetings were categorized as being from "mixed stakeholders" if they were meetings with industry and non-industry stakeholders together, or the stakeholder was unspecified

Table 4. Lobbying registrants and lobbying registrations related to marketing to kids and Bill S-228, and their communications, from the Registry of Lobbyists, summarized by stakeholder type

Stakeholder Type	Lobbying 1	Registrants	Lobbying R	Registrations	Commu	inications	of communications per registrant	Standard Deviation
-	Number of registrants	% of all registrants	Number of registrations	% of all registrations	Number of communications	% of all communications		
All stakeholders	65	100.0	215	100.0	3418	100.0	56.6	81.0
Industry	53	81.5	179	83.3	2866	83.9		83.3
Non-Industry	12	18.5	36	16.7	552	16.1	46.0	72.7
							communications per registrant s 56.6 54.1	

Table 5. Communications by lobbying registrants, registered with subject matters related to marketing to kids and Bill S-228 in the Registry of Lobbyists, summarized by government institution and stakeholder type

Government Institution	All Stak	ceholders	Ir	Industry Stakeholders			Non-Industry Stakeholders		
	Number of communications	% of all stakeholder communications	Number of communications	% of communications in government institution	% of industry stakeholder communications	Number of communications	% of communications in government institution	% of non- industry stakeholder communications	
All Government Institutions	3418	100.0	2866	83.9	100.0	552	16.1	100.0	
House of Commons	1226	35.9	905	73.8	31.6	321	26.2	58.2	
Health Canada (HC)	371	10.9	311	83.8	10.9	60	16.2	10.9	
Agriculture and Agri-Food Canada (AAFC)	331	9.7	322	97.3	11.2	9	2.7	1.6	
Innovation, Science and Economic Development Canada (ISED)	318	9.3	316	99.4	11.0	2	0.6	0.4	
Senate of Canada	224	6.6	134	59.8	4.7	90	40.2	16.3	
Global Affairs Canada (GAC)	171	5.0	171	100.0	6.0	0	0.0	0.0	
Canadian Heritage (PCH)	156	4.6	153	98.1	5.3	3	1.9	0.5	
Prime Minister's Office (PMO)	151	4.4	139	92.1	4.8	12	7.9	2.2	
Finance Canada (FIN)	98	2.9	86	87.8	3.0	12	12.2	2.2	
Treasury Board Of Canada Secretariat (TBS)	90	2.6	75	83.3	2.6	15	16.7	2.7	
Privy Council Office (PCO)	43	1.3	38	88.4	1.3	5	11.6	0.9	

Canadian Radio-	39	1.1	39	100.0	1.4	0	0.0	0.0
elevision and	37	1.1	37	100.0	1.7	v	0.0	0.0
Telecommunications								
Commission								
(CRTC)	20	2.2		06.4	0.0		2.6	0.2
Environment and	28	0.8	27	96.4	0.9	1	3.6	0.2
Climate Change								
Canada (ECCC) Canadian Food	26	0.0	26	100.0	0.0		0.0	0.0
	26	0.8	26	100.0	0.9	0	0.0	0.0
Inspection Agency (CFIA)								
Public Safety	24	0.7	24	100.0	0.8	0	0.0	0.0
Canada (PS)								
Employment and	18	0.5	16	88.9	0.6	2	11.1	0.4
Social Development								
Canada (ESDC)								
Гransport Canada (TC)	15	0.4	15	100.0	0.5	0	0.0	0.0
nfrastructure	14	0.4	12	85.7	0.4	2	14.3	0.4
Canada (INFC)								
Competition Bureau	11	0.3	11	100.0	0.4	0	0.0	0.0
Canada (COBU)				1 NA				
Public Services and	10	0.3	10	100.0	0.3	0	0.0	0.0
Procurement Canada								
(PSPC)								
Canada Revenue	9	0.3	8	88.9	0.3	1	11.1	0.2
Agency (CRA)								
Public Health	8	0.2	4	50.0	0.1	4	50.0	0.7
Agency of Canada								
(PHAC)								
Immigration,	5	0.1	4	80.0	0.1	1	20.0	0.2
Refugees and								
Citizenship Canada								
(IRCC)								
Intergovernmental	5	0.1	2	40.0	0.1	3	60.0	0.5
Affairs Secretariat								
(IGA)				40	0.7			
Justice Canada (JC)	5	0.1	5	100.0	0.2	0	0.0	0.0
Indigenous and	3	0.1	0	0.0	0.0	3	100.0	0.5
Northern Affairs								
Canada								

Status of Women Canada (SWC)	3	0.1	2	66.7	0.1	1	33.3	0.2
Communications	2	0.1	2	100.0	0.1	0	0.0	0.0
Security	2	0.1	2	100.0	0.1	U	0.0	0.0
Establishment								
Canada (CSEC)								
Indigenous Services	2	0.1	0	0.0	0.0	2	100.0	0.4
Canada (ISC)	2	0.1	U	0.0	0.0	2	100.0	0.4
National Defence	2	0.1	1	50.0	0.0	1	50.0	0.2
(DND)	2	0.1	1	30.0	0.0	1	30.0	0.2
Statistics Canada	2	0.1	1	50.0	0.0	1	50.0	0.2
(StatCan)	2	0.1	1	30.0	0.0	1	30.0	0.2
Canadian Dairy	1	0.0	1	100.0	0.0	0	0.0	0.0
Commission (CDC)	1	0.0	1	100.0	0.0	V	0.0	0.0
Canadian Institutes	1	0.0	0	0.0	0.0	1	100.0	0.2
of Health Research	1	0.0		0.0	0.0	•	100.0	0.2
(CIHR)								
National Capital	1	0.0	1	100.0	0.0	0	0.0	0.0
Commission (NCC)								
Natural Resources	1	0.0	1	100.0	0.0	0	0.0	0.0
Canada (NRCan)								
Office of the	1	0.0	1	100.0	0.0	0	0.0	0.0
Commissioner of								
Official Languages								
(OCOL)								
Rural Economic	1	0.0	1	100.0	0.0	0	0.0	0.0
Development								
(Minister's Office)					*			
Service Canada	1	0.0	1	100.0	0.0	0	0.0	0.0
(ServCan)								
Shared Services	1	0.0	1	100.0	0.0	0	0.0	0.0
Canada (SSC)								

Table 6. Communications by lobbying registrants, registered with subject matters related to marketing to kids and Bill S-228 in the Registry of Lobbyists, summarized by Designated Public Officer (DPOH) category and stakeholder type<sup>1</sup>

Designated Public Office Holder (DPOH) Category	All Stak	eholders	Ind	ustry Stakehol	ders	Non-Industry Stakeholders			
	Number of communicati ons	% of communicati ons by all stakeholders	Number of communicati ons	% of communicati ons by industry stakeholders	% of communicati ons in that DPOH category	Number of communicati ons	% of communicati ons by non- industry stakeholders	% of communicati ons in that DPOH category	
All Categories	3218	100.0	2689	100.0	83.6	529	100.0	16.4	
1) Parliamentarians & their staff	2519	78.3	2026	75.3	80.4	493	93.2	19.6	
a) Prime Minister's Office	156	4.8	143	5.3	91.7	13	2.5	8.3	
b) Ministers & Parliamentary Secretaries	175	5.4	157	5.8	89.7	18	3.4	10.3	
c) Ministerial Staff	817	25.4	753	28.0	92.2	64	12.1	7.8	
d) Members of Parliament, Senators & their staff	1371	42.6	973	36.2	71.0	398	75.2	29.0	
2) Civil servants & their staff	699	21.7	663	24.7	94.8	36	6.8	5.2	
a) Privy Council Office	43	1.3	38	1.4	88.4	5	0.9	11.6	
b) Deputy Ministers (DM)	113	3.5	110	4.1	97.3	3	0.6	2.7	
c) Assistant Deputy Ministers (ADM)	245	7.6	233	8.7	95.1	12	2.3	4.9	
d) Other government officials	298	9.3	282	10.5	94.6	16	3.0	5.4	

<sup>&</sup>lt;sup>1</sup>These analyses were completed only for communications occurring in government institutions representing ≥1% of total communications (n=3218/3418 total communications)