**POR Registration Number: 034-17**

**PSPC Contract Number: HT372-173214**

**Contract Award Date: October 4, 2017**

**Delivery Date: November 2017**

**Contracted Cost: $59,217.65 (taxes included)**

**Sugary Drinks Reduction Campaign Focus Groups (HC POR-17-07)**

**Executive Summary**

**Prepared by:**

**Corporate Research Associates Inc.**

**Prepared for:**

**Health Canada**

***Ce rapport est aussi disponible en français.***

**For more information on this report, please email:**

por-rop@hc-sc.gc.ca



Suite 5001, 7071 Bayers Road

Halifax NS B3L 2C2

[www.cra.ca](http://www.cra.ca)

1-888-414-1336

# Executive Summary

Corporate Research Associates Inc.

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Contract Award Date: October 4, 2017

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### Background

Health Canada is currently working on a campaign to educate Canadians on the importance of replacing sugary drinks with water.

Health Canada’s Sugary Drinks Reduction Campaign (SDRC) aims at empowering parents of pre-teens and teens to reduce the provision of sugary drinks in their homes, with the goal of reducing their children’s consumption of these drinks. The goal of the campaign is to increase parents’ awareness of their influence on their children’s choices at home, as well as to increase parents’ awareness of sugary drinks reduction information and resources available to them by Health Canada.

Three concepts were evaluated in terms of message clarity, credibility, appeal, and relevance to the target audience. Findings from the study will be used to help inform and further develop the creative approach and the development of additional campaign products.

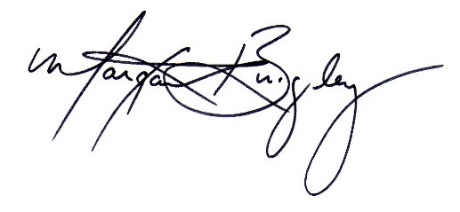
### Methodology

A total of eight (8) traditional, in-person focus groups were conducted with parents of pre-teens / teens, with two groups conducted in each of the following markets: Calgary, St. John’s, Quebec City and Sudbury. In each market one group included parents with marginal health literacy, while a second group included those with an adequate health literacy (as screened by the Newest Vital Sign health literacy screening tool). Group discussions were conducted November 14th to 20th, 2017.

Caution must be exercised when interpreting the results from this study, as qualitative research is directional only. Results cannot be attributed to the overall population under study, with any degree of confidence.

### Political Neutrality Certification

I hereby certify as a Representative of Corporate Research Associates Inc. that the deliverables fully comply with the Government of Canada political neutrality requirements outlined in the ***Directive on the Management of Communications***. Specifically, the deliverables do not include information on electoral voting intentions, political party preferences, standings with the electorate or ratings of the performance of a political party or its leaders.



Signed

Margaret Brigley, President & COO | Corporate Research Associates

Date: March 28, 2018

### Key Findings

Findings of the ***Sugary Drinks Reduction Campaign Focus Groups*** suggest that parents perceive water to be a common drink in their household and do not readily identify a serious problem with sugary drinks in the home. Accordingly, they do not feel compelled to reduce sugary drink intake and were not clear on why such action is both warranted and required.

Health Canada defines sugary drinks as:

*“Beverages high in free sugars. This includes: soft drinks, fruit-flavoured drinks, 100% fruit juice, flavoured waters with added sugars, sport and energy drinks, and other sweetened hot or cold beverages, such as iced tea, cold coffee beverages, flavoured milks and flavoured plant-based beverages.”*

When asked to consider what beverages constitute a sugary drink, parents readily identified a wide range of sugary drinks, and generally concurred that most beverages include some level of sugar. Across audiences, water, coffee/tea, vegetable juice and white milk are typically not considered a sugary drink.

Across locations, parents generally perceive water, milk and juice to be the primary beverages consumed at home. Accordingly, for most, sugary drinks are not considered a significant problem in their home for youth, though their consumption is deemed more regular outside the home. Indeed, sugary drinks are primarily associated with a drink outside the home, for special occasions or when eating out. Packaged sugary drinks are especially common for packed lunches given their convenience. Overall, parents generally perceive about one-third of their child’s daily beverage consumption to be sugary drinks, and this is generally consistent regardless of nutritional literacy.

Parents’ purchase of sugary drink is primarily influenced by taste, price and dietary needs. Without question, children’s taste preference influences parents’ purchase behaviour, as most parents are reluctant to waste money by purchasing product that won’t be consumed. With cost and health considerations in mind, many parents have chosen to introduce water as a beverage of choice in the home. Parents identified a variety of risks with drinking sugary drinks, most notably type 2 diabetes, obesity, and tooth decay. They also highlighted some other risks they associated with sugary drinks including addiction, mood swings, hyperactivity and acne.

Many parents openly discussed encouraging a balanced lifestyle that includes consumption of all kinds of foods and beverages in moderation. These parents do not look at drink consumption in isolation, but rather in relation to their children’s overall diet (i.e., sugary foods and beverages) and to their level of physical activity. In essence, many felt that a little sugar will cause no harm given their child’s high activity level. Having a balanced lifestyle was often mentioned as a value parents want to pass on to their children.

When considering key statements relating to sugary drinks, parents generally agree with the risks associated with sugary drinks and appreciate the value of drinking water at home. Many questioned the believability of the fact ‘*sugary drinks are the highest contributors of sugars in our diets*’, given the high prevalence of processed foods in society, and were hesitant to believe that ‘*teens are the highest consumers of sugary drinks’*. In fact, in their households, many considered adults to be the bigger ‘abusers’ of sugary drinks. Further, parents were not convinced that *‘teens are drinking the most at home in the afternoon/ evening, due to availability’*, given that did not ring true in their household. Most felt that the majority of their child’s sugary drink consumption is outside the home.

Across location and audience type, many parents took exception to the statement ‘*parents are the highest influencers of their teen’s consumption*’. While they considered that true for younger children (pre-teens or young teenagers) it was felt that once teenagers are working outside the home, have their own disposable income, and spend less time at home, they make their own purchase decisions, with friends and advertising having greater influence than parents.

Key barriers to replacing sugary drinks at home typically include cost, taste and lack of need. Parents were not convinced that sugary drinks pose a serious problem in their household and see no need to take action.

While many parents profess to include water as a drink of choice in their home, they question if there are many ways to make water an appealing choice. Many felt the options are limited to adding fresh fruit, flavour shots, colouring the water, or encouraging use of a trendy water bottle.

When presented with three creative concepts (see appendix C), findings highlight that none of the three concepts include a strong call to action that encourages parents to take action. That said, across locations there was a clear concept preference. Of the three concepts, only one concept (***kaleidoscope***) evoked a strong emotional response, although at times, this emotional response was polarizing, with some parents criticizing the ad for blaming them or being too forceful. Regardless, findings suggest this concept is deemed empowering given its attention-getting use of statistics and it clearly has the potential to compel a shift in behavior. It is the only concept that was considered as supporting the claim that home consumption of sugary drinks among youth is problematic. This is particularly important given parents’ perceived lack of need to change sugary drink consumption in their household. Importantly, however, while the use of statistics is particularly attention-getting and empowering, this concept lacks clear messaging on why sugary drink consumption is a problem.

Of the other two presented concepts, there was general agreement on the perceived ineffectiveness of the ‘***Shhh***…’ concept due to its lack of personal relevance. The ‘***refrigerator’*** concept, though well received and considered realistic, was not deemed compelling to motivate change.

### Conclusions

When considering the final development of any social marketing campaign, findings suggest that a clear call to action is needed to encourage parents to visit the website. Further, the website URL should consider an action-oriented name that is suggestive of healthy drinks. Parents have clear expectations of what information they would expect to find on a ‘healthydrinks’ website, including full provision of statistics, information on daily sugar intake, actual sugar content in common drinks, and healthy alternatives. Tools and resources deemed helpful include an app that provides guidance on sugary beverage intake or healthy alternatives, and a calculator to help determine a drink’s sugar content. Finally, findings suggest the use of blogs has limited appeal to parents. Direct mail design preference is mixed, though parents believe any information must clearly outline the risks of sugary drinks and why their consumption should be minimized.