

MEMO / NOTE DE SERVICE

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TO: Board of Health for the City of Ottawa Health Unit

DESTINATAIRE : Conseil de santé de la circonscription sanitaire de la ville d'Ottawa

**FROM: Dr. Isra Levy,
Ottawa Public Health**

Contact :
Gillian Connelly,
Health Promotion and Disease
Prevention
ext. 28971,
[**gillian.connelly@ottawa.ca**](mailto:gillian.connelly@ottawa.ca)

**EXPÉDITEUR : D^r Isra Levy,
Santé publique Ottawa**

Personne ressource :
Gillian Connelly,
Division de la promotion de la santé
et de la prévention des maladies
poste 28971,
[**gillian.connelly@ottawa.ca**](mailto:gillian.connelly@ottawa.ca)

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SUBJECT: FEDERAL GOVERNMENT PROPOSED HEALTHY EATING STRATEGY

**OBJET : STRATÉGIE EN MATIÈRE DE SAINES ALIMENTATION DU
GOUVERNEMENT FÉDÉRAL**

PURPOSE

The purpose of this memo is to provide the Ottawa Board of Health with an overview of Health Canada's recently released Healthy Eating Strategy and Ottawa Public Health's (OPH) response to the federal government's consultations to date on: Revisions to

Canada's Food Guide; Front of pack labeling for sugars, sodium and saturated fat; and Banning partially hydrogenated oil in foods.

BACKGROUND

Health Canada's 'Vision for a Healthy Canada' identifies actions to help people achieve and maintain good physical and mental health and its Healthy Eating Strategy is a key element of this vision.

The multi-year Healthy Eating Strategy includes initiatives on:

- **Improving healthy eating information**, including revising Canada's Food Guide;
- **Protecting vulnerable populations**, including restricting the commercial marketing of unhealthy foods and beverages to children;
- **Strengthening labeling and health claims**, including changes to the nutrition facts table, list of ingredient requirements, and consulting on front-of-package labeling for sugars, sodium and saturated fat;
- **Improving nutrition quality standards**, including reducing sodium in prepackaged and restaurant foods and consulting on eliminating the use of industrially produced trans fat in foods; and
- **Supporting increased access to and availability** of nutritious foods through the Nutrition North Canada program.

These initiatives will support making healthier food environments for all, aligning with OPH's 2015 – 2018 Strategic Direction – Inspiring Healthy Eating, Active Living.

Accordingly, OPH has welcomed the announcement of the strategy and engaged in the consultation processes with regard to same, which were initiated by Health Canada in late 2016.

Health Canada has announced that there will be opportunities, over the course of the next several years, to provide input into shaping the future of public health nutrition policies at the federal level. Health Canada recently conducted three open consultations regarding the revision of Canada's food guide, front-of-pack nutrition labelling, and banning partially hydrogenated oils in foods.

DISCUSSION

In Ottawa, almost half of adults¹ and one in five youth² report being overweight or obese and more than half of residents aged 12 years and over consume less than five vegetables and fruits a day³. In addition, more than half of adults eat at restaurants or consume ready-to-eat foods, take-out or fast foods two or more times a week⁴.

Research shows that children and youth who do consume five or more servings of vegetables and fruit a day are substantially less likely to be overweight or obese⁵. Furthermore, the United States Food and Drug Administration made a preliminary determination in 2013 that partially hydrogenated oils, which are the major dietary source of industrially-produced trans fat in processed food, were no longer recognized as safe for human food⁶. Trans fat intake has been linked to an increased risk of coronary heart disease by contributing to the buildup of plaque inside the arteries that may cause a heart attack. Trans fats increase the risk of heart disease because they raise unhealthy cholesterol levels and lower healthy cholesterol levels. Furthermore, eating processed and fast food has been linked to an increased risk for overweight and obesity. In addition, over 75 percent of the sodium Canadians eat comes from processed foods⁷. Too much sodium can lead to high blood pressure, stroke, heart disease and kidney disease.

Many personal and environmental factors influence food and drink choices. Personal factors such as education, cooking skills, time commitments, family and peers affect the foods people chose to consume. Access to, and cost of, healthy food also influences food choices, as does the pervasive availability of unhealthy foods and beverages in an environment of constant direct and indirect advertising. An encompassing response from all levels of government is necessary to effectively address this reality.

The following overarching principles have guided OPH's input into Health Canada's Healthy Eating Strategy to date:

¹ Ottawa Public Health. (2016). Self-reported adult Body Mass Index, Canadian Community Health Survey [Datafile 2013-2014]. Statistics Canada, Ottawa, Ontario.

² Ottawa Public Health. (2013). Healthy Eating, Active Living and Body Image among Youth – Results from the Ontario Student Drug Use and Health Survey 2009-2011. Ottawa, Ontario.

³ Canadian Community Health Survey 2013/2014 Statistics Canada, Share File, Ontario MOHLTC.

⁴ Rapid Risk Factor Surveillance Survey (RRFSS) 2014.

⁵ Rolls B, Ello-Martin MS, Tohill BC. (2004). What can intervention studies tell us about the relationship between fruit and vegetable consumption and weight management? *Nutrition Reviews*; 62(1):1-17.

⁶ U.S. Food and Drug Administration. (2015). FDA Cuts *Trans* Fat in Processed Foods. Available at: <http://www.fda.gov/ForConsumers/ConsumerUpdates/ucm372915.htm>

⁷ Health Canada. (2007). Canadian Community Health Survey, Cycle 2.2, Nutrition 2004. Nutrient intakes from food: provincial, regional, and national summary tables. Vol 1. Ottawa.

- **Creating Supportive Environments:** Policies are required to create supportive environments that enable people to make healthy choices. For example, the food industry has been 'self-regulating' on marketing to children. Each company has its own definitions of marketing to children, children programming and healthy foods. Several studies have demonstrated that this self-regulation is not working⁸. Policies focused on improving the food environments can help improve Canadian eating habits as there is consensus that nutrition education alone is not enough to change behaviour⁹. This includes banning marketing to children, tougher regulations to eliminate trans fats and to reduce salt in processed foods.
- **Supporting Informed Food Choices:** Nutrition information must be clear and easily accessible in order for people to make informed food choices for themselves and their families. This includes front of package and clearer labelling on added sugars.
- **Strengthening Food Industry Regulations:** Banning the use of trans fats, decreasing elevated sodium levels in food supply, and protecting vulnerable populations by banning marketing to children are required to improve Canadian's eating habits and food choices.

CONSULTATION

Outlined below is OPH's response to the federal government's three consultations to date on 1) Revisions to Canada's Food Guide; 2) Front of pack labeling for sugars, sodium and saturated fat; and 3) Banning partially hydrogenated oil in foods.

1) Canada's Food Guide consultation

Canada's Food Guide is intended to help Canadians make informed food choices by providing practical healthy eating recommendations based on the best evidence. The guide's current format is not meeting the needs of all audiences and some users have difficulty understanding and applying some of the recommendations¹⁰. Health Canada

⁸ Potvin-Kent, M., Dubois, L., Wanless, A. (2011). Self regulation by industry of food marketing is having little impact during children's preferred television. *International Journal of Paediatric Obesity*, early online, ppp.1-8.

⁹ Why We Need to Stop Marketing to Kids. (May 2016). *Public Health and Education Journal*. 82(1). Available at: <http://journal.phecanada.ca/issues/143/volume-82-issue-1/why-we-need-stop-marketing-kids>

¹⁰ Health Canada. (2016) Consultation on Canada's food guide. Available at: <http://www.healthycanadians.gc.ca/health-system-systeme-sante/consultations/foodguide-guidealimentaire/index-eng.php>

invited input for developing healthy eating recommendations, identifying ways to effectively communicate nutrition information to Canadians, and better understanding how different audiences use healthy eating recommendations.

The online consultation was open to the general public and health professionals until December 8th, 2016. OPH participated in the online survey and sent a letter to Dr. Hasan Hutchinson, Director General of the Office of Nutrition Policy and Promotion within the Health Products and Food Branch of Health Canada regarding OPH's recommendations for Canada's Food Guide. The following summarizes OPH's recommendations, as outlined in the aforementioned letter, and OPH's response to the online survey is attached at Appendix 1.

OPH envisions a revised Food Guide that focuses on:

A. A total diet approach

OPH has recommended shifting from a nutrient-based approach to a whole food-based approach in which healthy, less processed foods are clearly identified as a foundation for healthy eating. The use of daily servings has been shown to be cumbersome for the general public¹¹. Therefore, the food guide should address how foods should be consumed in a context of a total diet. Some good examples include the Mediterranean Food Guide Pyramid and the Swedish Food Guide. The first illustrates what foods to eat “daily”, “weekly” and “occasionally” in order to follow a healthy eating pattern^{12,13} whereas the latter conveys food-based messages by highlighting foods to ‘eat more’, ‘switch to’, and ‘eat less’¹⁴.

B. More natural or “minimally processed foods” and less “ultra-processed foods”

OPH has recommended that the new Canada Food Guide should define processed and ultra-processed foods and promote natural and minimally-processed foods as

¹¹ Health Canada. (2016). Evidence Review for Dietary Guidance: Summary of Results and Implications for Canada's Food Guide. Available at <http://healthycanadians.gc.ca/publications/eating-nutrition/dietary-guidance-summary-resume-recommandations-alimentaires/index-eng.php>

¹² United Nations Educational, Scientific and Cultural Organization (UNESCO). (2014). The Mediterranean Diet. Available at <http://mediterradiet.org/en/about>

¹³ Sofi F, Cesari F, Abbate R, Gensini GF, Casini A. (2008). Adherence to Mediterranean diet and health status: meta-analysis. *BMJ*;337:a1344. Available at: <http://www.bmj.com/content/bmj/337/bmj.a1344.full.pdf>

¹⁴ National Food Agency, Sweden. (2015). Food habits, health and environment. Available at <http://www.livsmedelsverket.se/en/food-habits-health-and-environment/>

the basis of the diet. Recommendations should limit the use of processed foods, consuming them in small amounts as ingredients in culinary preparations or as part of meals based on natural or minimally processed foods. Because of their ingredients, ultra-processed foods—such as packaged snacks, soft drinks, and instant noodles—are nutritionally unbalanced as they are high in added sugars, trans fat, saturated fat, sodium, artificial flavours and colours. As a result of their formulation and presentation, they tend to be consumed in excess, and displace natural or minimally processed foods^{15,16,17,18}.

C. Aspects of healthy eating beyond types and amounts of foods, including the promotion of food skills and eating together as a family

OPH has recommended that the new Canada's Food Guide should include promotion of food skills and eating together as a family. Eating together as a family has a very positive influence on healthy eating and weight for children and adolescents. When parents and children eat together, they are more likely to eat healthy balanced meals and improve their intake of fibre and important vitamins and minerals¹⁹. Typically, these families have been shown to eat more vegetables, fruit, and calcium-rich foods, and drink less pop. Accordingly, eating family meals is associated with a lower risk of becoming overweight and may also help to prevent disordered eating in adolescence. Evidence strongly suggests that regular family meals have long-term nutritional benefits^{20,21}. Eating together allows parent(s) to

¹⁵ Monteiro, C. A. et al. (2013). Ultra-processed products are becoming dominant in the global food system. *Obesity*, [S.I.], v. 14, Suppl. 2, p. 21-28. Available at: <http://onlinelibrary.wiley.com/doi/10.1111/obr.12107/pdf>

¹⁶ Ministry of Health of Brazil. Secretariat of Health Care. (2014). Primary Health Care Department. Dietary Guidelines for the Brazilian population / Ministry of Health of Brazil, Secretariat of Health Care, Primary Health Care Department ; translated by Carlos Augusto Monteiro – Brasília : Ministry of Health of Brazil. Available at http://189.28.128.100/dab/docs/portaldab/publicacoes/guia_alimentar_populacao_ingles.pdf

¹⁷ Ludwig, D, Nestle, M. (2008). Can the Food Industry Play a Constructive Role in the Obesity Epidemic? *JAMA*. 2008;300(15):1808-1811.

¹⁸ WILLETT, W. C.; SKERRET, P. J. (2015). *Eat, Drink, and Be Healthy: The Harvard Medical School Guide to Healthy Eating*. New York: Free Press.

¹⁹ Dietitians of Canada. Eating Together. (Jan 2009). The Family Meal in Practice-based Evidence in Nutrition (PEN). [Internet]. <http://www.pennnutrition.com/KnowledgePathway.aspx?kpid=6750&trcatid=38>. Access only by subscription.

²⁰ Larson NI, Neumark-Sztainer D, Hannan PJ, Story M. (2007). Family meals during adolescence are associated with higher diet quality and healthful meal patterns during young adulthood. *J Am Diet Assoc*. 107:1502-1510.

model healthy eating behaviours, which helps teach children habits that last a lifetime. Furthermore, hands-on cooking activities are a great way to improve mealtime practices and eating habits^{22,23,24}. Involving children and youth in food preparation helps build their self-confidence and self-efficacy through skill development.

D. More plant based sources of protein, as a primary source of protein

While meat is a good source of protein, there are many other good sources of protein: fish, poultry, legumes, tofu, eggs, nut and seeds. OPH has recommended that the Food Guide encourage Canadians to choose protein sources such as nuts, legumes, fish poultry, eggs and tofu, limit the consumption of red meat and avoid processed meat.

Red meat includes beef, pork and lamb whereas processed meats (i.e. meats that are preserved by smoking, curing or salting, or the addition of chemical preservations) includes hot dogs, ham, sausages, beef jerky and canned meat.

Evidence from a number of studies indicates an association between red meat and processed meat consumption to increased risk of colorectal cancer²⁵, heart disease~~Error! Bookmark not defined.~~ and type 2 diabetes²⁶. The food guide should include direction to limit red and processed meats.

E. Limit industry involvement in setting dietary guidelines

The food industry has historically: influenced what foods are featured in dietary guidelines; marketed their products intensively to children; influenced the conduct of

²¹ Burgess-Champoux T E, Larson N, Neumark-Sztainer D, Hannan, PJ. Are family meal patterns associated with overall diet quality during the transition from early to middle adolescence? (2009). J Nutr Educ Behav. 41: 79-86.

²² Condrasky, M. (2006). Cooking with a Chef. Journal of Extension, 44(4).

²³ Horodyski, M. A., Hoerr, S., & Coleman, G. (2004). Nutrition education aimed at toddlers: A pilot program for rural, low-income families. Family & Community Health, 27;103-113.

²⁴ Chenhall, C. (2010). Improving cooking and food preparation skills: A profile of promising practices in Canada and abroad. Healthy Living Issue Group (HLIG) of the Pan-Canadian Public Health Network.

²⁵ World Cancer Research Fund. (2007). Food, Nutrition, Physical Activity and the Prevention of Cancer: A Global Perspective. Available at: <http://www.bmj.com/content/bmj/337/bmj.a1344.full.pdf>

²⁶ Harvard Magazine. (Jan-Feb 2012). A Diabetes Link to Meat. Available at: <http://harvardmagazine.com/2012/01/a-diabetes-link-to-meat>

research and development of public health policy; and lobbied against policies that may promote health but hinder profits from current food product lines.**Error! Bookmark not defined.**^{27 27}. Thus, the current eating environment includes nutrition misinformation and pervasive availability of unhealthy foods and beverages, which limits individuals' ability to make informed food choices.

OPH has recommended that the food industry not be included in the decision-making processes of establishing national dietary recommendations. Although the food industry is a stakeholder, which influences the availability of foods and nutritional health of Canadians, the goals of public health may not align with the financial interests of the food industry. Furthermore, industry involvement undermines the public's confidence in dietary recommendations²⁷.

2) Consultation on front-of-package nutrition labeling

Health Canada has proposed mandatory front-of-package labeling for foods high in nutrients that are a public health concern; sugars, sodium, and saturated fat. Frequently eating foods high in these nutrients can lead to increased health risks, such as obesity, heart disease, and high blood pressure²⁸. In Canada, there is currently no standardized front-of-package nutrition labeling system.

OPH supports Health Canada's proposal to implement a mandatory front-of-package nutrition labeling system. For some consumers, the Nutrition Facts table can be difficult to understand and requires time and motivation to access due to its location on the back or side of the package^{29,30}. Furthermore, health claims are voluntary and can therefore be used as a marketing tool, highlighting only the positive attributes of the packaged products on which they appear³¹.

Research has indicated that front-of-package labeling systems that focus on nutrients of concern (such as a 'high in' labeling approach) rather than a summary system are more

²⁷ Nestle, Marion. (2013). Food Politics: How the Food Industry Influences Nutrition and Health. University of California Press.

²⁸ Standing Senate Committee on Social Affairs, Science and Technology. (2016). Obesity in Canada. Available at: http://www.parl.gc.ca/content/sen/committee/421/SOCI/Reports/2016-02-25_Revised_report_Obesity_in_Canada_e.pdf

²⁹ Campos S, Doxey J, Hammond D. (2011). Nutrition labels on pre-packaged foods: a systematic review. Public Health Nutrition. 14(8):1496-1506.

³⁰ Cecchini M, Warin L. (2016). Impact of food labelling systems on food choices and eating behaviours: a systematic review and meta-analysis of randomized studies. Obes Rev. 17:201-210

³¹ Health Canada. (2016). Health Claims. Available at: <http://www.hc-sc.gc.ca/fn-an/label-etiquet/claims-reclam/index-eng.php>

effective in helping consumers choose healthier products^{32,33}. The 'high-in' front-of-package labeling approach will bridge the gap to address the limitations noted above and provide useful, easy to access health related information that is consistent across all foods that currently include a nutrition label.

This consultation was available online and was open to the general public and health professionals until January 13th, 2017. OPH's response to the online survey is attached at Appendix 2.

3) Consultation on banning partially hydrogenated oils in foods

Health Canada has proposed to implement new regulations to ban the use of partially hydrogenated oils in foods sold in Canada. OPH supports this proposal.

Although Health Canada has made significant progress in reducing trans fats in prepackaged foods and restaurant foods since the early 2000's, trans fats are still present in many processed foods that are commonly consumed by Canadians. Prohibiting the use of partially hydrogenated oils in foods is necessary to help most Canadians reduce their daily trans fat intake to less than 1% of total calories, which would in turn reduce the risk of Canadians developing chronic diseases such as heart disease, reduce their risk of stroke, as well as all-cause-mortality³⁴.

This consultation was available online and was open to the general public and health professionals until January 13th, 2017. OPH's response to the online survey is attached at Appendix 3.

CONCLUSION

Healthy public policy is a foundation to health promotion. While public awareness and skill building are important components to enabling individuals to make healthy choices, healthy policies and programs that improve access to healthy food all contribute to making healthy eating and active living choices easier, which lead to an increased sense of belonging and a better quality of life. Consequently, OPH will continue to work

³² Hersey JC, Wohlgenant KC, Arsenault JE, Kosa KM, Muth MK. (2013). U.S. National Library of Medicine, National Institutes of Health, Effects of front-of-package and shelf nutrition labeling systems on consumers. *Nutr Rev.* 71(1):1-14.

³³ Hodgkins CE, Raats MM, Fife-Schaw C, Peacock M, Gröppel-Klein A, Koenigstorfer J, Wasowicz G, Stysko-Kunkowska M, Gulcan Y, Kustepeli Y, Gibbs M, Shepherd R, Grunert KG. (2015). Guiding healthier food choice: systematic comparison of four front-of-pack labelling systems and their effect on judgements of product healthiness. *Br J Nutr.* 113(10):1652-63.

³⁴ World Health Organization. (2016). Effects of trans-fatty acid intake on blood lipids and lipoproteins: a systematic review and meta-regression analysis. Available at: http://www.who.int/nutrition/publications/nutrientrequirements/tfa_systematic_review/en/

towards influencing policies that impact our eating habits and the foods available to Canadians.

‘Original signed by’

Dr./ D^r Isra Levy

Medical Officer of Health/ Médecin chef en santé publique

Ottawa Public Health/ Santé publique Ottawa

SUPPORTING DOCUMENTATION

Appendix 1 - OPH response to the online survey on revising Canada’s Food Guide

Appendix 2 - OPH response to the online survey on front-of-package nutrition labeling

Appendix 3 – OPH response to the online survey on banning partially hydrogenated oils

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