# **A Food Policy for Canada Consultation**

**Diabetes Canada** 

**Submission to Agriculture Canada September 30, 2017** 

## A Food Policy for Canada Consultation: Diabetes Canada Submission to Agriculture Canada September 30, 2017

Diabetes Canada is a national health charity representing 11 million Canadians living with diabetes or prediabetes. The organization leads the fight to end diabetes by helping those affected live healthy lives, preventing the onset and consequences of the disease, and working to discover a cure. It has a heritage of excellence, innovation and leadership.

Diabetes Canada was pleased to contribute to the online survey hosted by AAFC for this consultation of A Food Policy for Canada. Healthy eating is a key pillar in the management of type 1 diabetes, type 2 diabetes, gestational diabetes and prediabetes. As part of an overall healthy lifestyle, it can help improve glycemic control for people living with diabetes and reduce the incidence of type 2 diabetes in those at high risk. Diabetes Canada applauds Agriculture Canada for its commitment to improve the food environment through exploring options for a Food Policy for Canada.

People with diabetes and those at risk of developing diabetes have a large stake in ensuring a healthy food environment. Indeed their health depends on it. Even those Canadians not directly affected by diabetes should take note of the increasing incidence of the illness because of the impact on the publicly funded drug plans, health care system, employers, and the economy overall. The impact of the food and agriculture system extends well beyond the food sector into health and the resultant impact of health on the economy.

Diabetes Canada would like to thank Agriculture Canada for the opportunity to provide feedback on the development of a Food Policy for Canada. Diabetes Canada's 2013 Clinical Practice Guidelines for the Prevention and Management of Diabetes in Canada underscore the importance of a healthy diet for people with diabetes and we are pleased with Agriculture Canada's initiative to improve the health of Canadians.

Diabetes Canada recognizes that A Food Policy for Canada involves increasing access to affordable food, improving health and food safety, conserving our soil, water, and air, and growing more high-quality food in a sustainable manner. What follows are Diabetes Canada's recommendations on the topics of access to affordable food and improving health and food safety. In addition to food policy recommendations, Diabetes Canada feels it is important to provide complementary public policy recommendations to promote healthy eating among Canadians, contributing to the prevention type 2 diabetes and other chronic diseases associated with diet. A Food Policy for Canada, alongside other public health policies, will help frame Canada's long term vision of health, environmental, social and economic goals as they relate to food, and also identify actions that can be taken in the short-term.

# Diabetes Canada's Recommendations for Increasing Access to Affordable Food

Diabetes Canada's recommendations emphasize policies that will improve access to affordable food and reduce inequities to access by Canadians with lower income. At present, less healthy foods are often more affordable than healthier options, resulting in greater consumption by Canadians at highest risk of developing chronic disease such as diabetes. Furthermore, measures to increase access to affordable healthy food should be designed to assist Canadians in decreasing the consumption unhealthy foods.

Recommendation #1: Diabetes Canada recommends that the Government of Canada introduce a manufacturers levy on sugar sweetened beverages (SSBs) and use the revenue generated to promote the health of Canadians.

#### **Description and Evidence**

The average Canadian drinks about 100 litres of sugary beverages each year. That's almost a serving a day, and that serving usually contains equivalent to 10 teaspoons of sugar. Young people consume the most sugary drinks. The average youth drinks 578 ml of sugary drinks each day which can contain up to 16 teaspoons or 64 grams of sugar. This likely puts them well over the recommended daily sugar maximum (5% of total energy intake). Sugar-sweetened beverages—such as non-diet pop, sports drinks, energy drinks, fruit-flavoured drinks, sweetened iced teas and blended coffee drinks—can be a significant source of calories. Excessive consumption of calories contributes to obesity, which is a major risk factor for type 2 diabetes.

Recent research<sup>ii</sup> shows that regular consumption of these beverages (one or more servings per day) increases the risk for type 2 diabetes—regardless of weight. Even at a healthy weight, those who consume a substantial portion of calories from sugar-sweetened beverages have a 20 per cent higher risk of developing type 2 diabetes compared to others of the same weight whose calories come from other sources.

Nudging consumers in the right direction through pricing strategies will contribute to sustainable changes to improve health. A growing collection of studies shows that a levy on these beverages decreases consumption. Twenty countries, including the United Kingdom, Hungary, France and Finland, 8 jurisdictions in the United States and Mexico have successfully implemented such taxes. In Hungary, France and Finland, demand for SSBs decreased between 3-8%.<sup>iii</sup>

Jurisdiction	Levy characteristics	Results
Mexico	2014 excise tax of 1 peso/ounce	average 10% ↓ in sugary drinks purchases¹
Berkeley	2015 \$0.01/ounce tax on sugary drink	10% ↓ in sales of taxed beverages. Sales of water ↑15.6% and milk 3.5%↑²
Finland	2011 with ↑ tax rate each year	Sales ↓ in relation to three tax hikes. <sup>3</sup>
France	2012 excise duty on drinks with added sweeteners. Rate \tau over time.	↓ soft drink demand of 3.3% (2012) 3.4% (2013) <sup>15</sup>
Hungary	2012 "public health tax" for unhealthy products (high in fat, sugar and salt). Multi-tiered tax based on sugar content	40% of food/beverage products reformulated to fit into a lower tax bracket. Demand for soft drinks, ↓7.5% (2012), ↓ 6% (2013). <sup>4</sup>

In Mexico, a 10 per cent tax on drinks containing added sugar was introduced in 2014. By December 2014, the year-over-year reduction for that month reached 12 per cent, with the greatest decline seen in poorer communities. This matters to us in Canada because those with lower incomes have the highest rates of diabetes.

Recommendation #2: Diabetes Canada recommends that the government subsidize the sale of core foods, such as fruits, vegetables, and whole grains.

#### **Description and Evidence**

The World Health Organization<sup>v</sup> states that low consumption of fruits, vegetables, and whole grains is also associated with poor health consequences. Unfortunately, many Canadians are unable to afford adequate amounts of these healthy foods.

Chronic diseases are a major public health concern in Canada. The incidence of type 2 diabetes continues to increase as well as numerous other chronic conditions. With high rates of obesity, and an aging Canadian population the impact of diabetes is likely to continue to increase unless action is taken to reduce modifiable risk factors. An unhealthy diet is one of the top risk factors for obesity and type 2 diabetes burden in Canada. Diets high in 3 nutrients of concern - sodium, saturated fat and sugars are strongly linked to obesity and/or major chronic diseases. Taking action to reduce intakes of these nutrients to healthier levels can help reduce important risk factors for chronic disease burden in Canada.

<sup>&</sup>lt;sup>1</sup> M. Arantxa Cochero1, Juan Rivera-Dommarco2, Barry M. Popkin3 and Shu Wen Ng. Health Affairs, February 2017, In Mexico, Evidence Of Sustained Consumer Response Two Years After Implementing A Sugar-Sweetened Beverage Tax.

<sup>&</sup>lt;sup>2</sup> Silver LD, Ng SW, Ryan-Ibarra S, Taillie LS, Induni M, et al. (2017) Changes in prices, sales, consumer spending, and beverage consumption one year after a tax on sugar-sweetened beverages in Berkeley, California, US: A before-and-after study. PLOS Medicine 14(4): e1002283Berkely

<sup>&</sup>lt;sup>3</sup> Ecorys. (2014) Food Taxes and their impact on competitiveness in the agri-food sector: Final report. Rotterdam, Netherlands.

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Subsidizing the cost of healthy foods would make healthier food more affordable. Studies have shown that cost is a major factor that influences decision-making. Therefore, placing healthier food at a lower price-point through the use of subsidies will lead to an increase in consumption of these healthful foods.

Studies from Australia<sup>vi</sup> and South Africa<sup>vii</sup> found that subsidizing the cost of healthy foods significantly increased the consumption of fruits, vegetables, and whole grain foods, and lowered consumption of high sugar food, fried, processed and fast food. The improvement in nutrient intake was sufficient to promote health benefits and continue the programs.<sup>viii</sup>

Cost-effectiveness models of subsidies show promise. A US modeling study found that subsidizing core foods (fruit, vegetables and milk) for low-income earners would be more effective at increasing consumption of these foods than would increasing the food stamps benefit. A 10 per cent subsidy on these foods would close the consumption gap by 4-7 per cent; a subsidy of 22 per cent would close the gap by 10 per cent. A recent World Health Organization (European region) report states that economic models predict a 50% subsidy for healthy core foods could increase fibre intake and decrease caloric consumption.

## Diabetes Canada's Recommendations for Increasing the Health and Safety of Foods

Recommendation #3: Diabetes Canada recommends that the Government of Canada work with the provinces and municipalities to increase the availability of potable water in public spaces and homes across the country. Furthermore, we propose that the Government of Canada follow through on its commitment to end long-term drinking water advisories on public systems on reserves across the country by 2021.

Water is a healthy hydration choice for all Canadians. It is a life nutrient and plays an essential role in regulating various systems in the body. Many Canadians consume excessive amounts of sugar sweetened beverages which have adverse impacts on health, particularly on the development of obesity and type 2 diabetes. Diabetes Canada recommends that Canadians replace sugar sweetened beverages with water instead. Such recommendations can be supported through initiatives such as providing free and easy access to water at recreation centres, school events, and government spaces.

In order to facilitate implementation of this recommendation, additional actions must occur across government. In many regions in Canada, access to free, safe, clean drinking water is not a reality. Far too many communities are affected by drinking water advisories, with First Nations communities being disproportionately impacted by issues of drinking water safety. These are also the communities who experience a high risk for type 2 diabetes and chronic disease. When the availability of potable water is low or expensive or its quality is questionable, people may opt for less healthy hydration alternatives out of necessity. In order for water to be a realistic choice for Canadians, they need to be able to access free and safe drinkable water on a daily basis.

### Public Policy Recommendations to Promote Healthy Living

Diabetes Canada reiterates its policies related to the promotion of healthy living that are not directly linked with Agriculture Canada's A Food Policy for Canada submission, but are relevant to creating a healthy food environment for all Canadians. We encourage Agriculture Canada to support these initiatives.

Recommendation #4: Diabetes Canada recommends exploring policy options and evidence related to regulating the maximum level of sugar, salt and saturated fat in processed foods and out-of-home meals, in order to promote optimal health.

#### **Description and Evidence**

The Government of Canada should explore the feasibility of food composition standards for processed foods and out-of-home meals for sugar, salt, and saturated fat, as they are major contributors to population intakes of these nutrients of concern. Individuals who reduce their intake of salt and sugar by adding less to their own foods still consume large amounts through the processed foods in their regular diets. For example, in the US, 75% of the salt that citizens consume is added to the food before it has been purchased. Reducing population intake of these unhealthy substances through consumer behavior poses a challenge because the salt and sugar added to their own foods is only a fraction of their daily consumption. Therefore, a more effective way of decreasing the amount of salt in people's diet is to reduce the salt, sugar and fat content in manufactured foods as these do not necessitate changes in individual behavior.

Public health experts argue that regulation is the best option for industry reform for three reasons: financial penalties can be imposed on those who do not comply, the routinization of legislation means it is less likely to be dismissed should governments change, and it creates an even playing field for industry since all companies are forced to comply. XiV, XV Nine countries have established mandatory limits on sodium content: Paraguay, Belgium, Hungary, Netherlands and Portugal have targets for bread only, Bulgaria and Greece have targets for up to four products (bread, cheese, meat products and tomato products), and South Africa and Argentina have mandatory limits for a range of food products. XVI However, these have yet to be evaluated.

Recommendation #5: Diabetes Canada recommends menu labelling guidelines be developed at the national level for reference by the provinces. Labelling should be provided on-premises, on menus and menu boards, to act as prompts that inform purchase decisions. Menu items should provide calories as well as other information useful for the health of consumers, such as sodium, saturated fat, and sugar content.

#### **Description and Evidence**

The prevalence of overweight and obesity has increased dramatically in Canada among both children and adult populations in the recent past. It is so widespread in 2017 that it is being called an epidemic. As body weight increases, so too does the risk of developing

various chronic conditions. Obesity is associated with incidence of type 2 diabetes, several types of cancer and major forms of cardiovascular disease, to name only a few. An estimated 80 to 90 per cent of people with type 2 diabetes are overweight or obese. Research suggests that insulin sensitivity, glycemic control, hypertension and dyslipidemia improve in people with, and at risk of developing, type 2 diabetes when they are able to achieve a modest weight loss. The increase in the number of meals consumed outside the home is one of the many factors contributing to overweight and obesity and deserves special attention.

Diabetes Canada applauds Ontario's steps taken to improve the health of Canadians by including the calorie count of foods and beverages on signage and menus in Ontario restaurants. This will be useful in helping inform Ontarians food decision making at the point of purchase.

In the last 40 years, Canadians have increased their consumption of away-from-home meals. Studies show that most consumers underestimate the number of calories and fat in meals. \*\*xviii\*\* Frequent eating out is associated with weight gain and obesity. \*\*xviii\*\* The application of nutrition information has consistently been linked with healthier diets, \*\*x and therefore, it is important to provide nutrition information on menus to help make food choices in away-from-home meals more healthful.

The U.S. enacted legislation in 2010 that requires restaurant chains to provide calorie information on menus. This has been trialed on a voluntary basis in the UK as of 2009. Moreover, a small number of restaurant chains in Australia also voluntarily display nutrition information on menus, and three states and territories have introduced the mandatory provision of kilojoule counts on menus.

Some studies show that menu labelling modestly improves consumers' selection of healthier menu items. \*\*xiv\*\* The impact of menu labelling varied across demographic groups - for example, women were almost always more likely to use menu labelling to inform their choices than men - however, these studies demonstrate that providing nutrition information results in lower intent to purchase foods higher in calories or fat. Requiring away-from-home food establishments to provide nutrient content information may encourage the introduction of more healthful options and the reformulation of existing menu items to reduce their fat and calorie content. Product reformulation would benefit all consumers, including those who may not choose to modify their order based on the presence of nutrition information.

Menu labelling is within provincial jurisdiction, but can be facilitated by national guidelines.

Recommendation #6: Diabetes Canada recommends exploring a nationwide adoption of healthy eating policies in public sector settings. Moreover, we suggest exploring the supports needed to implement these policies at the municipal level.

#### **Description and Evidence**

Spontaneous physical movement and play has substantially decreased and, as such, families are turning to organized sports and activity to compensate for the loss of active

play. XXVI While such efforts to increase physical activity are well intentioned, the unhealthy food and snacks consumed at many recreation centres and other public facilities may counter any potential benefits gained from exercise. XXVII A recent audit of recreation centres in B.C. found that the majority of foods and beverages served in these settings are calorie dense and lack nutritional value, XXVIII and this has been replicated in studies across Canada. Vending machines are often stocked with sugar sweetened beverages, and concession stands serve fried foods and treats such as chocolate bars and chips.

Four provinces in Canada (British Columbia, Manitoba, Ontario and New Brunswick) have published provincial guidelines or policy-making tool kits to help improve the food environment of community recreation centres, and municipal level programs, guidelines and policies are being proposed and implemented. These include:

- Capacity building guides for food providers to offer healthier choices, including forms to assess the facility, goal-setting information, healthy recipes, sample policies, and RFPs to help vendors apply for funding to reach their goals (B.C., Manitoba, N.B.)
- Guidelines for food and beverages available at sporting events (B.C.)
- Healthier Choices in Vending Machines in B.C. Public Buildings Policy (aligned with provincial healthy eating standards) (B.C.)
- Healthy eating in recreation settings working groups (Ontario)

At present, no evaluation work has been completed that looks at the impact of these policies on the consumption of foods and beverages in public settings.

Recommendation #7: Diabetes Canada recommends the development of regulations to restrict the marketing of foods and beverages to children.

#### **Description and Evidence**

The health and habits of Canadian children are being powerfully influenced by food and beverage marketing. Children are being systematically targeted in sophisticated marketing campaigns and in 2017 the degree and extent of exposure are greater than ever before. The vast majority of products being promoted are high in salt, fat, sugar and/or calories. In places where they live, learn, and play, children are bombarded daily - even hourly - with ads promoting sugary drinks, fast food and snack items of poor nutrient quality. Children are a captive audience to unhealthy food and beverage messaging delivered through television commercials, video games, mobile apps, billboards, sales promotions, sponsorships, and countless other means.

The impact on health is evident. Children and youth are developing type 2 diabetes- an illness previously seen in adults. Children are experiencing overweight and obesity at rates that are unprecedented in this country. As a direct result of impact on health, Diabetes Canada supports restricting marketing to children as an essential component of a healthy eating strategy. Diabetes Canada is a proud member of the Restrict Marketing to Kids Coalition. An even larger group of health organizations and influential individuals committed to the health of children have endorsed the *Ottawa Principles*, a policy recommendation accompanied by a set of definitions, scope and principles to guide marketing to kids policy-making in Canada. The *Ottawa Principles* call for the restriction of

commercial marketing of all food and beverages to children and youth 16 and under, and marketing refers to any means of advertising or promoting products or services.

Children deserve to be protected from excessive unhealthy marketing and harmful industry tactics. Restricting food and beverage marketing will support parents to make healthy decisions for their families. We need to create environments that make the healthy choices, the easy choices.

#### **Conclusion**

Diabetes Canada is pleased to submit feedback to Agriculture Canada in this consultation phase. A Food Policy for Canada will help with the sustainability of Canada's food system, the health of Canadians, and in the prevention and management of diabetes. The organization is supportive of Agriculture Canada's efforts to improve access to affordable food and increase the health and safety of food. Diabetes Canada will continue to be an active participant in future consultations regarding the development of A Food Policy for Canada and will do our part to contribute to a healthy eating pattern in Canada.

Thank you for the opportunity to provide input.

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