



# **Canadian Public Health Association Conference June 2017**

## **Healthy Eating Strategy Update**



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# Purpose

- To provide an update on the initiatives within Health Canada's Healthy Eating Strategy launched in October 2016:



- Revision of Canada's Food Guide
- Restricting Marketing of Unhealthy Foods and Beverages to Children
- Food Labelling Initiatives
- Trans Fat
- Sodium

<https://www.canada.ca/en/health-canada/services/publications/food-nutrition/healthy-eating-strategy.html>

# Canada's Healthy Eating Challenges



- Many Canadians do not follow a healthy eating pattern as part of a healthy lifestyle
- Poor diet is the primary risk factor for obesity and many chronic diseases, which places a significant burden on the health of Canadians and our health care system
- Despite progress achieved through several initiatives, the food environment makes it increasingly difficult for Canadians to make healthy choices:
  - There is widespread availability of inexpensive foods and beverages high in calories, fat, sodium and sugars
  - Marketing of foods is very powerful and children are particularly vulnerable
  - There is a constant flow of changing (and often conflicting) messages
  - Canadians face challenges in understanding and using nutrition information
  - Some subpopulations in Canada face challenges in accessing nutritious foods

# Healthy Eating Commitments



## Through the Mandate Letter, the Minister of Health is committed to:

- ✓ Introducing new regulations to improve the food supply by eliminating industrially produced trans fats and reducing sodium in processed foods
- ✓ Improving food labels to give more information on added sugars and artificial colours in processed foods
- ✓ Introducing new restrictions on the commercial marketing of unhealthy food and beverages to children, to protect our children from influential marketing practices
- ✓ Working with the Minister of Indigenous and Northern Affairs to update and expand the Nutrition North program, in consultation with Northern communities

# HEALTHY *eating* Strategy

**VISION:** Make the healthy choice the easy choice for all Canadians

Regulations, Guidance, Education.



Strong Evidence-base.



Strategic Partnerships.



Engaging Canadians and Stakeholders.



Openness and Transparency.



## Healthy Eating Information

- Revise Canada's Food Guide
- SSB Reduction Campaign

## Protecting Vulnerable Populations

- Restrict marketing of unhealthy foods and beverages to children

## Labelling and Claims

- Update Nutrition Facts table
- Introduce front-of-pack labelling of sugars, sodium and saturated fat

## Nutrition Quality Standards

- Eliminate industrial trans fat
- Reduce sodium

## Access to and Availability of Nutritious Foods

- Improve the Nutrition North Canada program



Nutritious food more readily available and accessible to Canadians.

**MAKE THE HEALTHY CHOICE THE EASY CHOICE**



Canadians can access, understand and use nutrition information.



Protect and support vulnerable Canadians.

# Openness & Transparency Policy



- On October 24<sup>th</sup>, the Minister of Health announced a new approach regarding transparency of stakeholder communications for healthy eating initiatives.
- All meetings and correspondence in which views, opinions, information and requests for information are relayed with the intent to inform development of policies will be published on a searchable / sortable table on the Canada.ca website, including the name of the organization as well as the topics and purpose of discussion.
- **Exemption:** formal submissions of feedback on policy proposals during consultation periods
- <http://healthycanadians.gc.ca/healthy-canada-vision-canada-en-sante/transparency-stakeholder-communications-transparence-intervenants-eng.php>



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# Transparency of stakeholder communications for healthy eating initiatives

Learn about Health Canada's changes to how stakeholder communication is handled for the healthy eating strategy.

## On this page

- [About open government](#)
- [Consulting with stakeholders](#)
- [A new approach to communicating with stakeholders](#)
- [Notification](#)
- [Protecting privacy](#)
- [How you can get involved](#)
- [For more information](#)

## About open government

Canada's commitment to open government will help the federal government to remain transparent and open with its citizens. As part of this commitment, we're making more information available to the public. We also want to create a more responsive government by providing Canadians with more opportunities to participate in discussions on:

- policies
- priorities
- regulations



# REVISION OF CANADA'S FOOD GUIDE

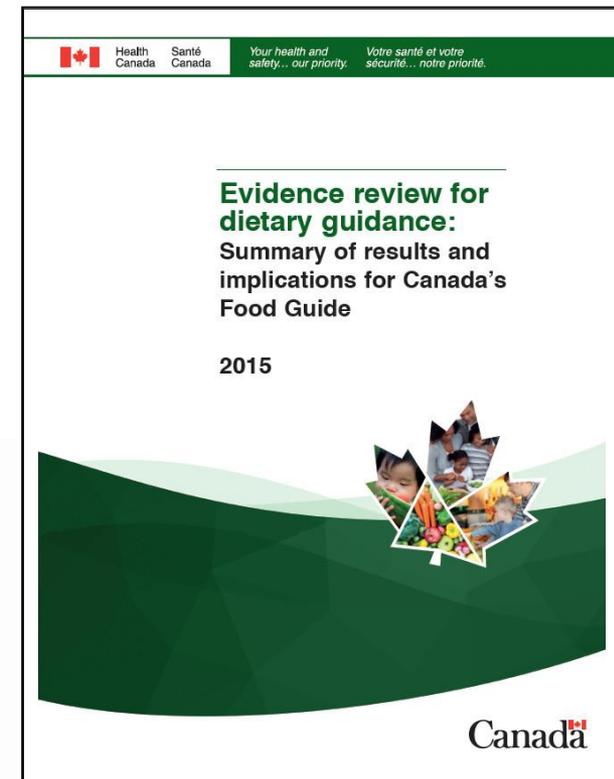
# Evidence Review

## 2015 Evidence Review for Dietary Guidance Reports – Released Fall 2016

<http://healthycanadians.gc.ca/publications/eating-nutrition/dietary-guidance-summary-resume-recommandations-alimentaires/index-eng.php>



- Scientific evidence is still strong, but some elements of guidance require updating to reflect recent evidence on food & health.
- The Food Guide is well-integrated into policies and programs, and consumer awareness is high, but stakeholders report Canadians are challenged in interpreting and applying guidance.



# Saturated fat intake and cardiovascular disease outcomes



Reports that examined associations between saturated fat intakes and health outcomes were reviewed (published between 2006 and 2017).

Convincing findings on these associations were reported by:

- World Health Organization (2015, 2016)
- US Dietary Guidelines Advisory Committee (2010, 2015)
- American College of Cardiology/American Heart Association (2013)
- Food and Agriculture Organization of the United Nations (2010)

## Conclusion

Replacing saturated fat with unsaturated fat has been associated with lower risk of ↑ LDL cholesterol, ↑ triglycerides, and CVD.

# Sugars intake and weight, type 2 diabetes, and oral health



Reports that examined associations between sugars intakes and health outcomes were reviewed (published between 2006 and 2017). Convincing findings on these associations were reported by:

- Dietary Guidelines Advisory Committee (2010, 2015)
- Scientific Advisory Committee on Nutrition (2015)

## Conclusion

Higher intakes of added sugars from foods and/or sugar-sweetened beverages have been associated with higher risk of ↑ body weight in children and adults, and type 2 diabetes in adults.

Higher intakes of sugars-containing beverages have been associated with higher risk of ↓ oral health in children

# Sodium intake and blood pressure



Reports that examined associations between sodium intakes and health outcomes were reviewed (published between 2006 and 2017). Convincing findings on these associations were reported by:

- World Health Organization (2012)
- US Dietary Guidelines Advisory Committee (2010)
- American College of Cardiology/American Heart Association (2013)
- National Health and Medical Research Council (2011)

## **Conclusion**

Higher intakes of sodium have been associated with higher risk of ↑ blood pressure.

# Dietary patterns and cardiovascular disease outcomes



Reports that examined associations between dietary patterns and health outcomes were reviewed (published between 2006 and 2017). Convincing findings on these associations were reported by:

- US Dietary Guidelines Advisory Committee (2010, 2015)
- American College of Cardiology/American Heart Association (2013)
- Canadian Cardiovascular Society (2012, 2016)

## Conclusion

Dietary patterns (e.g. DASH\*, Mediterranean) generally characterized by ↑ vegetables, fruits, whole grains, legumes, nuts, fish, and ↓ red and processed meats, refined grains, and sugar-sweetened foods and beverages have been associated with lower risk of ↑ LDL cholesterol, ↑ blood pressure, CVD.

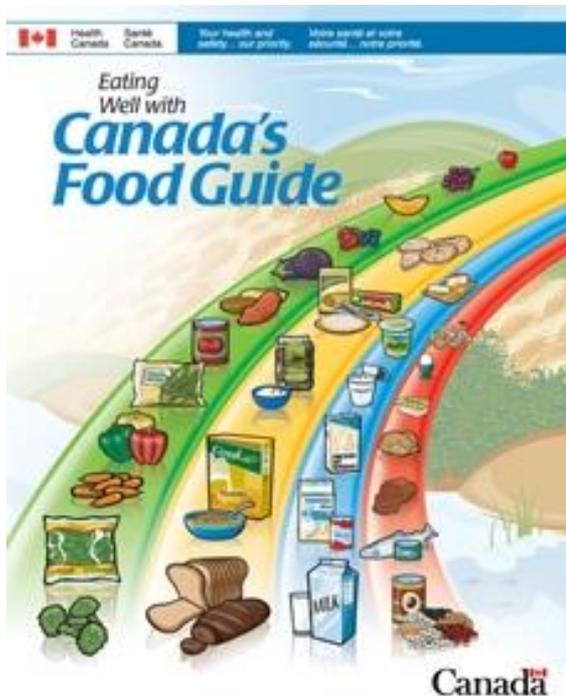
\*Dietary Approaches to Stop Hypertension

# Transform Canada's Food Guide to better meet the needs of different audiences



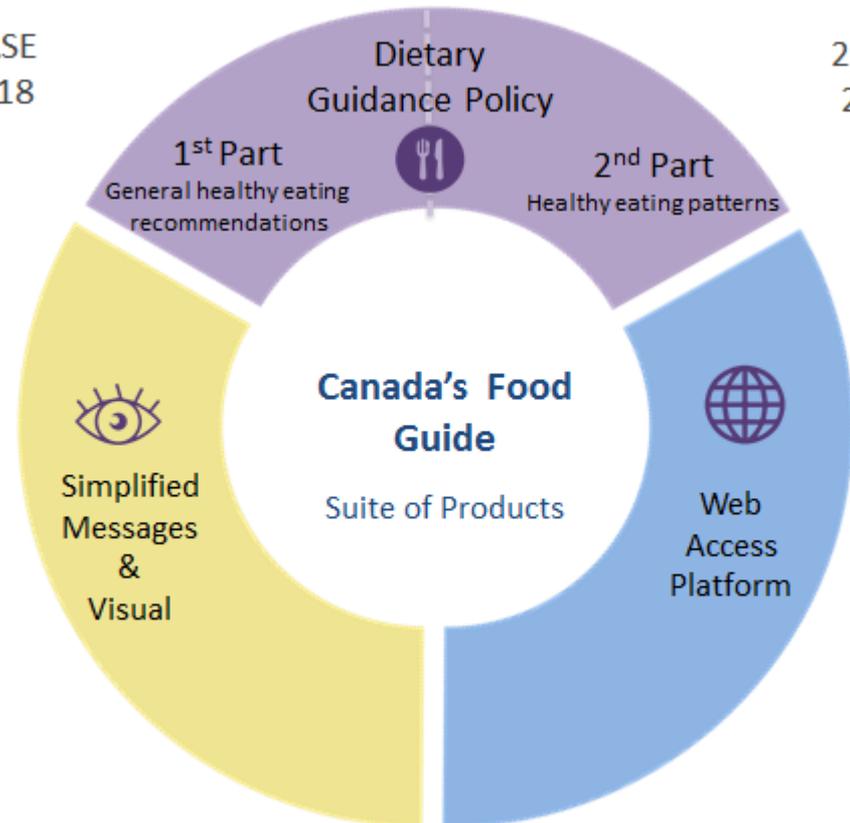
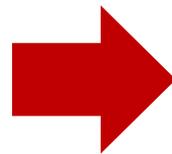
Current guidance communicated in  
"all-in-one" tool

Updated guidance communicated in  
different products



1<sup>st</sup> RELEASE  
2017/2018

2<sup>nd</sup> RELEASE  
2018/2019



# Dietary Guidance Policy

## Part 1: Draft guiding principles and recommendations



Guiding principles	Recommendations	Considerations
Overarching positions on healthy eating	For the application of each guiding principle at the population level	Factors that influence food choices and eating behaviours
	<ul style="list-style-type: none"><li>• Foods and beverages to encourage</li><li>• Foods and beverages to limit or avoid</li><li>• Food skills</li></ul>	<ul style="list-style-type: none"><li>• Health equity &amp; the determinants of health</li><li>• Cultural diversity</li><li>• Environmental impact of dietary guidance</li></ul>

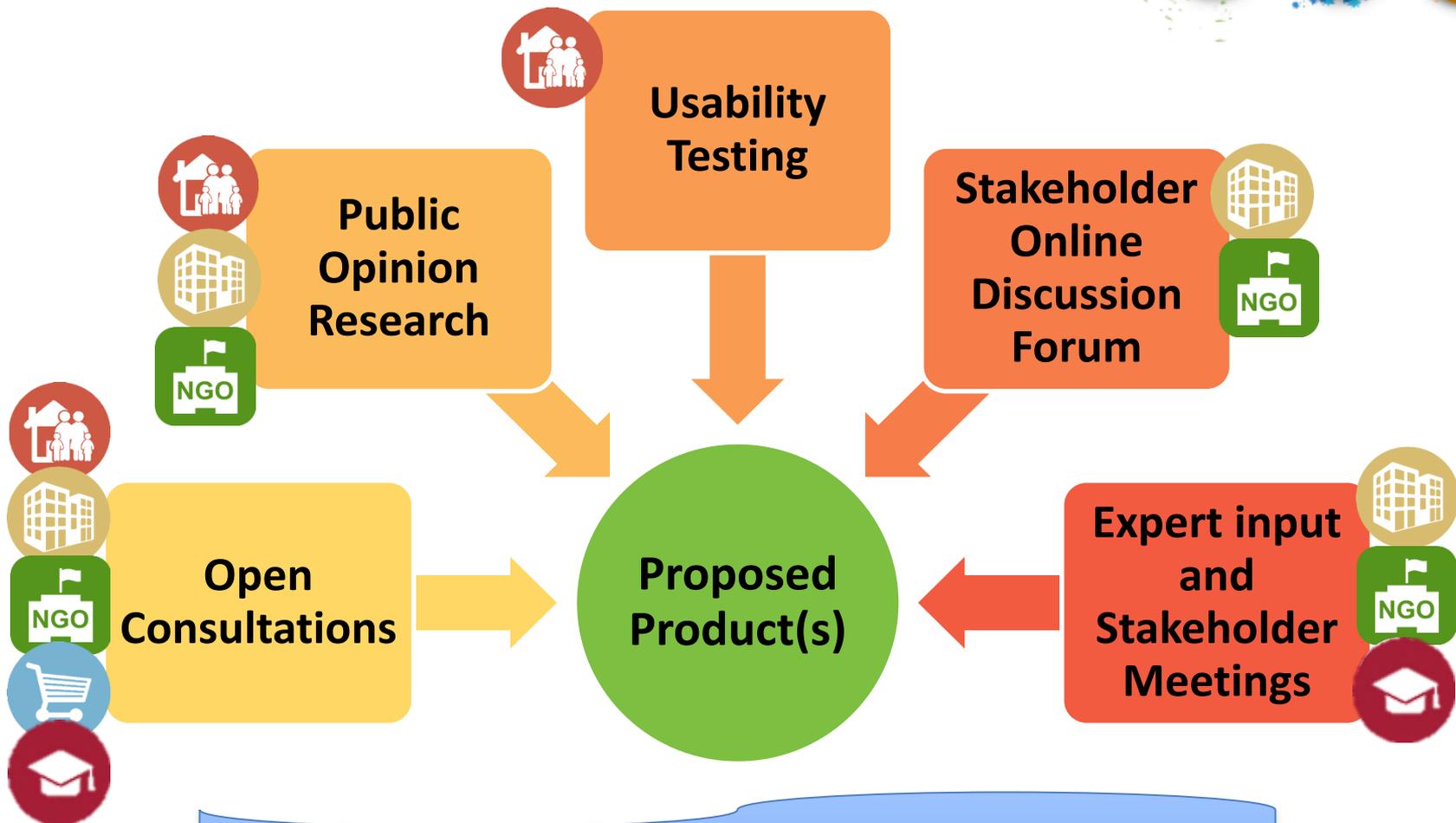
# Dietary Guidance Policy

## Part 2: Healthy eating patterns



- Complements guiding principles and recommendations with more specific recommendations on the amounts and types of foods that make up a healthy eating pattern in the Canadian context
- Healthy eating patterns will be developed once data from CCHS 2015 are available
- Healthy eating patterns will consider:
  - Nutritional science (e.g., nutrient standards; review of foods and risk of chronic disease)
  - Statistical analysis of food surveillance data (CCHS 2015)
  - Canadian context considerations (e.g., demographic data; food supply; policy environment)
  - User & consultation input
  - Expert advice
- Current work:
  - Developing proposed methodology
  - Consulting experts on key topics

# Engagement to Inform Resources



Engagement with Canadians to inform the development of Canada's Food Guide products

# Engagement with External Experts



## Purpose

- To complement HC's internal expertise, external academics, researchers and professionals are being consulted for advice on specific topics and to gather feedback on draft policies and products

## Membership

- A pool of experts identified through a comprehensive search and review strategy

## Selection Criteria

- Significant experience (>5 years) in at least one of the topic areas
- Published in the past 5 years in a credible peer reviewed journal
- Credible professional and research affiliations
- No direct interest or affiliation with industry
- Experience sitting on/chairing advisory bodies or steering committees
- Experience reviewing, assessing or completing systematic reviews
- Experience building national or provincial dietary guidance policy

# Where are we now?



## 2016 Fall Public Consultation

- Online consultation with the general public, health professionals and organizations

**Development** of Dietary Guidance Policy, healthy eating recommendations & related resources

## 2017 Spring Public Consultation

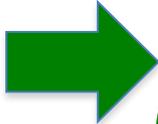
- Online consultation with the general public, health professionals and organizations

## 2017/18 Winter - 1<sup>st</sup> Release of Food Guide Products

- Part 1 Dietary Guidance Policy (General Principles and Recommendations); Simplified messages and visuals

## 2018/19 Winter - 2<sup>nd</sup> Release of Food Guide Products

- Part 2 Dietary Guidance Policy (Healthy Eating Patterns); Mobile-First Integrated Web Platform





# RESTRICTING MARKETING TO CHILDREN

# Overview

- Marketing of foods high in saturated fats, sugars and sodium (HFSS food) influences children's and youth's food preferences, consumption, and purchase requests
- In Canada and globally, food marketing to children is extensive and most marketing is for HFSS food

The government of Canada has committed to introducing new restrictions on the **commercial marketing of unhealthy food and beverages to children**

# Exposure to Marketing



- Canadian children see over 25 million food and beverage ads a year on their favourite websites of which 90% are for food high in sugar, salt and fat.
- Canadian adolescents spend over eight hours a day in front of a screen (e.g., on the internet, texting, watching television, and/or playing video games).
- Younger children spend on average between two and three hours in front of a screen per day.
- Children view an average of 4-5 food or beverage ads per hour on television, with the majority of advertised products (65-80%) not in line with Canadian dietary guidance.

# Policy Development



- Policy development will inform regulations
- Three key policy elements are currently being explored through research, engagement with experts, and consultations.



Age limits for the restrictions



Food and beverages to restrict



Scope of restricted marketing activities



# Age limits for the restrictions



## Analyses include assessing:

- Age at which children are exposed to marketing of unhealthy foods and beverages
- Cultural, societal, psychological and cognitive considerations
- Expert recommendation for target age
- Age at which children can understand persuasive nature of marketing
- Age limits used in other jurisdictions



# Defining “unhealthy” Food



- Identifying a nutrient profile approach to determine which foods and beverages for which marketing will be restricted.
- Considering and evaluating existing approaches (e.g. nutrient profile models) for restricting marketing to children.
- Ensuring approach to identifying foods and beverages is aligned with Canadian dietary guidance and other policies/regulations, with a particular focus on nutrients of concern (e.g., saturated fat, sugars, sodium).



# Scope of Restricted Marketing Activities



**Analyses include answering:**

- **Where and how are Canadian children being marketed unhealthy food and beverages?**
  - Through what platforms (e.g. TV, internet)
  - In what settings (e.g. schools, sports arenas, parks, stores)
  - Through what techniques (e.g. commercial ads, advergames)
- **How is the marketing environment changing?**
  - Greater computer use, cell phone ownership at an earlier age
  - Evolving marketing techniques (e.g. digital marketing)

# Recap of Work to Date



- **Evidence/Information Gathering**
  - Bilateral discussions with other jurisdictions (QC, ON, NS)
  - Review of evidence (regulatory models, policy elements)
  - Input from experts (bilateral discussions, policy roundtable)
  - Legal analysis
  - Extensive discussions with other government departments and agencies
- **Early Information Exchange with Stakeholders**
  - Health stakeholders (Stop Marketing to Kids Coalition)
  - Implicated industries and industry associations (Advertising Standards Canada, ThinkTV)
  - Provinces/Territories (e.g., Public Health Network, FPT Group on Nutrition)
  - All stakeholders (webinars on Feb. 28 / Mar. 1)

# Next Steps



- **Spring 2017**
  - Continue **policy development** –consultations with nutrient profiling experts and evidence reviews
  - Launch **broad consultation** including input from consumers, industry, health and other stakeholders
- **Summer-Fall 2017**
  - Refine **policy approach** based on consultation results and considerations from stakeholders on technical aspects of the policy
- **Spring-Summer 2018**
  - Consult Canadians on **regulatory approach**

# Awareness Raising Efforts by Health Canada



- Media releases and social media activity after consultation launched
- Close communication with provinces and territories
- Presentations at Dietitians of Canada Conference, Canadian Public Health Association Conference, Canadian Nutrition Society Conference
- Notifications of the consultation will be sent via email to:
  - stakeholders and individuals who have registered through our database
  - Individuals who receive emails from ONPP's nutrition bulletin account<sup>29</sup>

# Stakeholder Activity



Health stakeholders can support the consultation by:

- Educating the public about the importance of changing the food environment and taking action on these initiatives.
- Publicizing and promoting the upcoming consultation via social media channels (e.g. twitter, instagram, facebook, blogs).
- Encouraging members and followers to share details of the consultation with their own networks



# FOOD LABELLING INITIATIVES

# Updates to Nutrition Facts table and List of Ingredients



## Key new requirements:

- consistent serving sizes
- % Daily Value (DV) for total sugars
- DV footnote to provide context
- Added sugars grouped in ingredients list
- Declare food colours by common name

**Transition period of 5 years as of Dec 2016**

**Ingredients:** Sugars (fancy molasses, brown sugar, sugar) • Wheat flour • Vegetable oil shortening (soybean and/or canola oil and modified palm oil) • Liquid whole egg • Salt • Sodium bicarbonate • Spices • Allura Red

**Contains:** Wheat • Egg • Soy

**Ingrédients:** Sucres (mélasse qualité fantaisie, cassonade, sucre) • Farine de blé • Shortening d'huile végétale (huile de soja et/ou huile de canola et huile de palme modifiée) • Oeufs entiers liquides • Sel • Bicarbonate de sodium • Épices • Rouge allura

**Contient:** Blé • Oeufs • Soya

## Nutrition Facts Valeur nutritive

Per 1/2 cup (125 mL)  
pour 1/2 tasse (125 mL)

**Calories 80** % Daily Value\*  
% valeur quotidienne

**Fat / Lipides** 0.5 g 1 %  
Saturated / saturés 0 g 0 %  
+ Trans / trans 0 g

**Carbohydrate / Glucides** 18 g  
Fibre / Fibres 2 g  
Sugars / Sucres 15 g 15 %

**Protein / Protéines** 3 g

**Cholesterol / Cholestérol** 0 mg

**Sodium** 0 mg 0 %

**Potassium** 200 mg 4 %

**Calcium** 0 mg 0 %

**Iron / Fer** 0.3 mg 2 %

\*5% or less is **a little** / 5% ou moins c'est **peu**  
15% or more is **a lot** / 15% ou plus c'est **beaucoup**

# Current Nutrition Labelling has Limitations...



## Nutrient Content & Health Claims

- Highlights positive attributes of a food
- Voluntary
- Used as marketing tool



## Nutrition Facts table

- Location on side/back limits visibility when consumers are making choices
- Complexity makes it difficult for some consumers to understand
- Amount of detail can overwhelm some consumers

# ...that FOP nutrition labelling can Help Resolve



## What is FOP nutrition labelling?

- Systems that use nutrient criteria and symbols to indicate that a product has certain nutrition characteristics

## Objectives include:

- Focus on key nutrition information that consumers need to make informed food choices that supports healthy eating
- Help a wider range of consumers interpret factual nutrition information to make informed choices
- Improve the prominence of nutrition information when making choices at a glance
- Encourage industry to improve the nutritional quality of their foods

***There is growing interest in and push for FOP in Canada and worldwide***

# Options Identification



## Four FOP options selected for analysis

1. nutrient-specific traffic light model
2. summary graded system
3. nutrient-specific IOM model
4. nutrient-specific 'high in' model

¼ pie (175g) typically contains (pack serves 4)

Calories	Fat	Saturated	Sugars	Salt
383 kcal	MED 18.5g	HIGH 8.9g	LOW 2.2g	MED 1.28g
	26%	45%	2%	21%

of your guideline daily amount



## Key Considerations:

- Likelihood that the option will achieve the stated objectives
- Recommendations from authoritative organizations (e.g. mandatory, interpretive approach)
- The option would be feasible in the Canadian context (e.g. legislative and regulatory framework, existing labelling policies)

# Options Analysis



Key Pros	Key Cons
<ul style="list-style-type: none"> <li>Highlights both positive and negative attributes</li> </ul>	<ul style="list-style-type: none"> <li>No clear risk to health for low and medium levels of nutrients is a challenge for a mandatory approach</li> <li>Potential for health halo effect</li> </ul>
<ul style="list-style-type: none"> <li>Balances positive and negative attributes of foods in one score</li> </ul>	<ul style="list-style-type: none"> <li>Complex, category-specific algorithm makes it difficult to enforce</li> <li>No clear and consistent relationship between score and risks to health is a challenge for a mandatory approach</li> </ul>
<ul style="list-style-type: none"> <li>Positive approach to key nutrients of concern</li> </ul>	<ul style="list-style-type: none"> <li>Same as above</li> </ul>
<ul style="list-style-type: none"> <li>Compatible with legislation</li> <li>Strongest incentive for reformulation and innovation</li> </ul>	<ul style="list-style-type: none"> <li>Message is explicitly negative and warning symbols may be perceived as too strong</li> </ul>

¼ pie (175g) typically contains (pack serves 4)

Calories 383 kcal	Fat MED 18.5g 26%	Saturates HIGH 8.9g 45%	Sugars LOW 2.2g 2%	Salt MED 1.28g 21%
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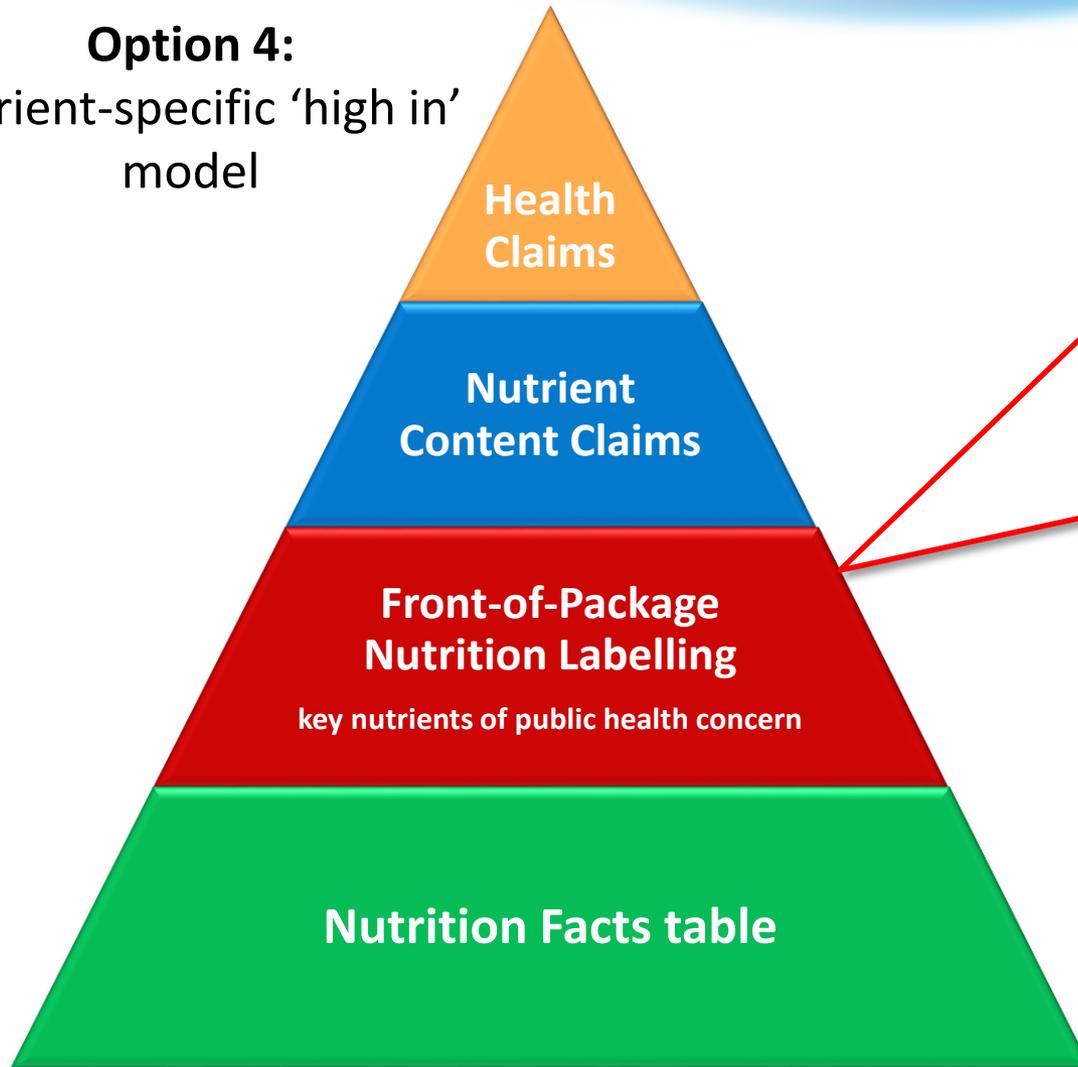
of your guideline daily amount



# The Selected FOP Approach



**Option 4:**  
nutrient-specific 'high in'  
model



## Would be:

- Mandatory
- Symbol-based
- Visible when a food is "high in" key nutrients that contribute to negative health outcomes
- Built on existing nutrition labelling

# Actions to Date



- Held a pre-regulatory online consultation (November 2016 – January, 2017)
- Held 14 focus groups in 6 cities across the country with a wide range of consumers, including those with adequate and marginal health literacy (December 2016)

# Elements of the FOP Labelling Proposal



## Thresholds

- Thresholds proposed at 15% DV for most foods:
  - Consistent with dietary pattern recommended by Canada's Food Guide that promotes healthy eating and reduces the risk of nutrition-related chronic disease
  - Aligned with other labelling policies (Nutrition Facts table, nutrient content claims) and Nutrition Facts Education Campaign

## Exemptions

- Full or conditional exemptions would mirror those for current nutrition labelling requirements
- Additional exemptions proposed for foods encouraged by Canada's Food Guide

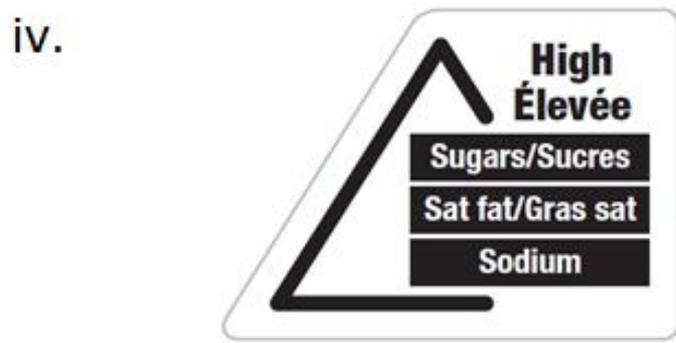
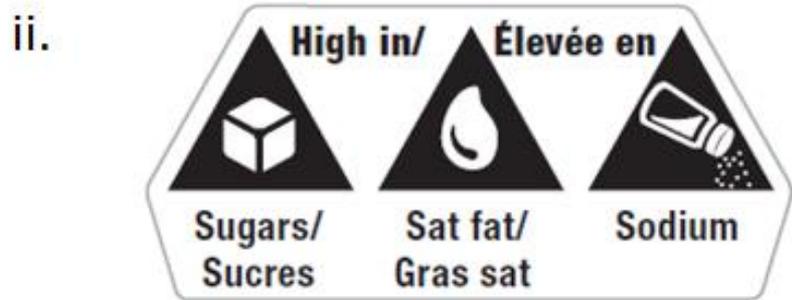
## Related Proposals

- Changes to nutrient content claims to align with FOP labelling policy objectives (e.g. no added sugars claims criteria)

# Elements of the FOP Labelling Proposal



## Symbols



# Focus Groups: Overall Reactions



## Participants support initiative stating:

### FOP Labelling could improve label use:

- Important elements include: symbols that are attention-grabbing and easy to find on a consistent location; credibility; and public education
- FOP would encourage people to learn to pay more attention to sodium, saturated fat and sugars in their diet.
- It would be helpful for people who tend not to look at the NFt.

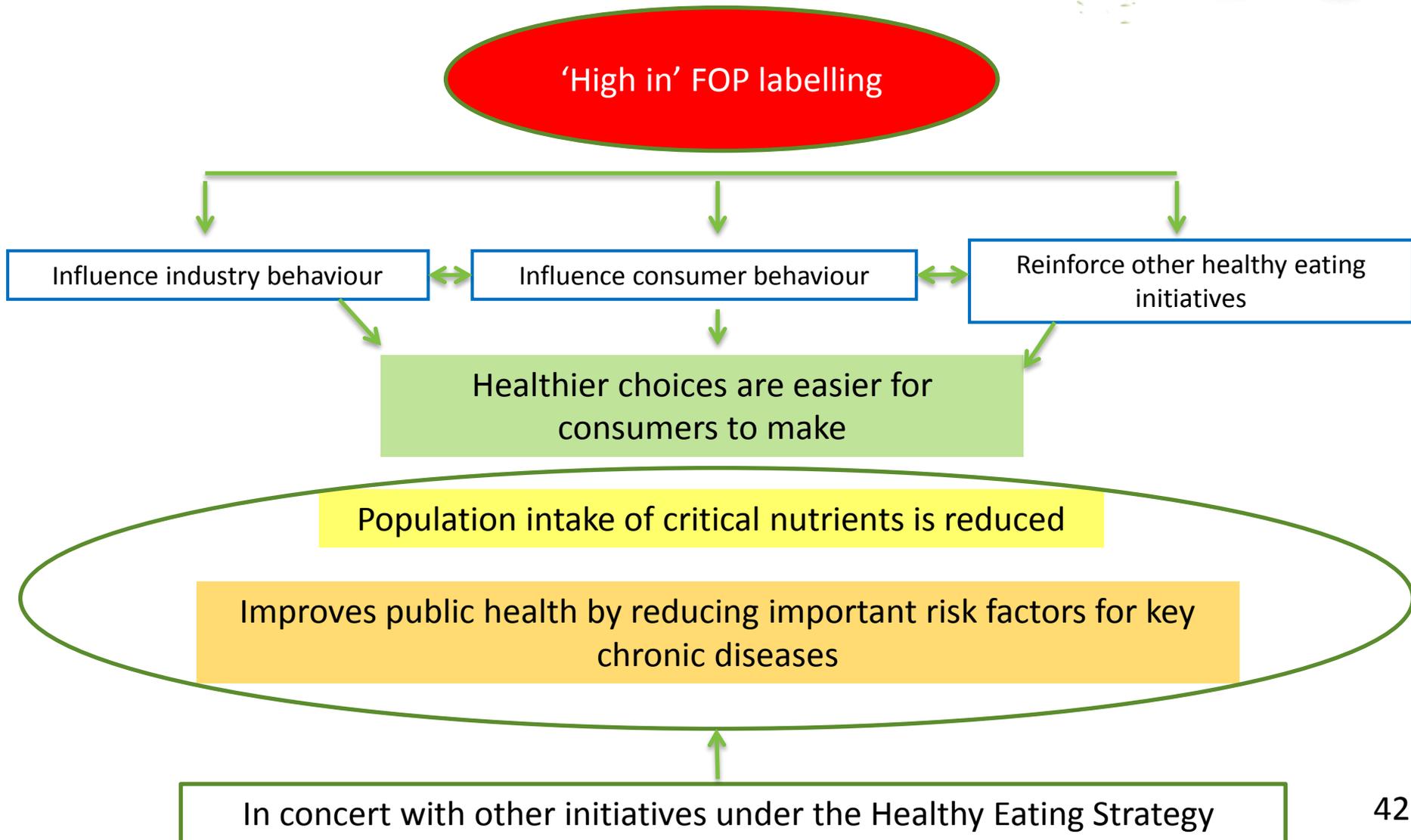
### FOP could change eating habits:

- It could affect how you eat at home – i.e. if you have a food with “High In” nutrients, you might be more likely to be careful about how much of it you consume when you see the symbol on the package.

### It could change the marketplace:

- It could motivate manufacturers to offer healthier foods so that they do not have to put this symbol on their products.

# Objectives and Desired Outcomes



# Next Steps



- Publish report on focus groups findings on Library and Archives Canada website (June 2017)
- Publish proposed regulations in Canada Gazette, Part I for a 75-day public comment period (fall 2017)
- Conduct further consumer research, as needed, to refine approach before finalizing the regulations (fall – winter 2017-18)

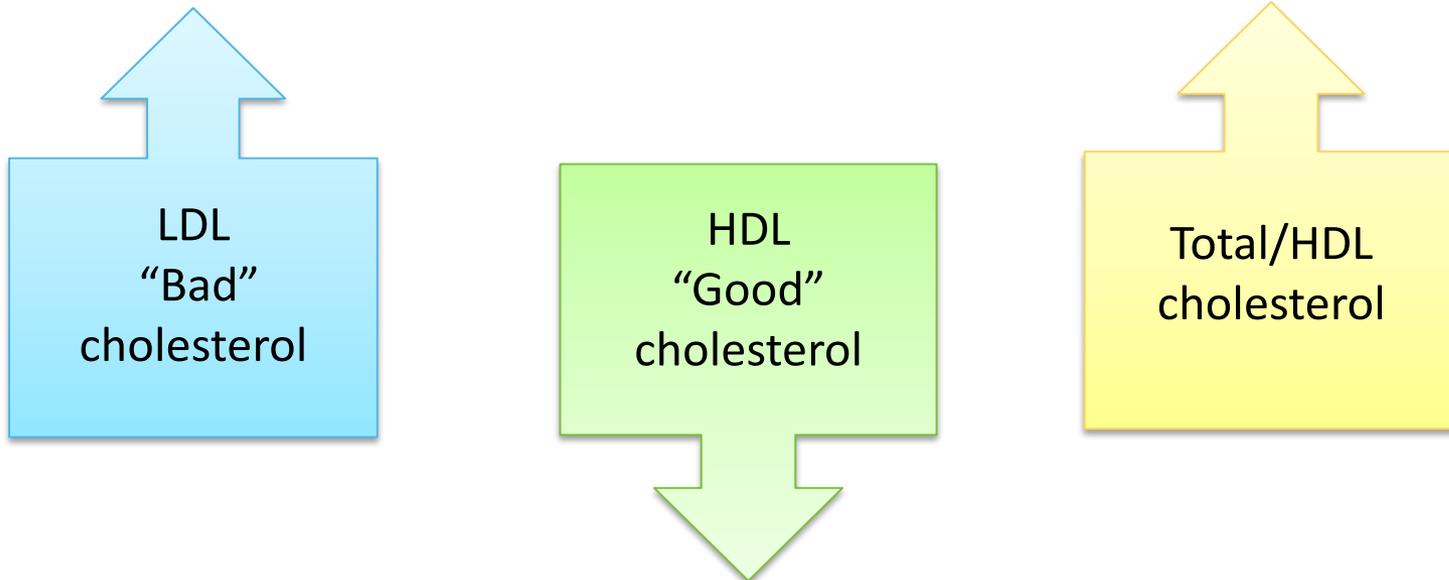


# TRANS FAT

# Background



- Trans fats can be naturally-occurring or industrially produced, mainly through partial hydrogenation of oils (PHOs)
- In the 1990's, Canadians trans fat intakes was ~3.7% of total energy
- The risk of coronary heart disease (CHD) is substantially increased with increasing intakes of *trans* fat
- The main mechanism through which *trans* fats increase CHD risk is by altering blood lipid levels:



# Earlier Actions



- Since the early 2000s, Health Canada has pursued a multi-faceted approach aimed at reducing the *trans* fat intakes of Canadians, which included:
  - Mandatory *trans* fat labelling
  - Permitting claims such as “*trans* fat free”
  - Setting voluntary targets for *trans* fat content
  - Active monitoring and open reporting on industry’s progress
- Health Canada’s initiatives to decrease the *trans* fat consumption of Canadians have been largely effective:
  - By 2007, the average *trans* fat intake for all Canadians had decreased to 1.42% of total energy
  - By 2011, the great majority of the food supply was meeting the voluntary targets for *trans* fat (exceptions include: some baked goods, margarines, lard and shortenings, coffee whiteners)

# Recent Actions



- Mandate commitment to bring in tougher regulations to eliminate industrially-produced trans fat (November 2015)
- Launched a Call for Data to collect information on the current use of PHOs in the food supply (May 2016)
- Held a pre-regulatory online consultation (November 2016 – January, 2017)
- Published a Notice of Proposal with 75 day consultation (April 7-June 21, 2017)

# Proposal & Next Step



- **Proposal:**

- Implement a prohibition on the use of PHOs in foods by adding them to Part 1 of the *List of Contaminants and Other Adulterating Substances in Foods*
- Transition period of one year

- **Next Step**

- Publish Notice of Modification (Summer 2017)

**Objective and Expected Outcome:**

Trans fat intake of the vast majority of Canadians is below the WHO recommendation of < 1% of total energy



# SODIUM REDUCTION

# Background

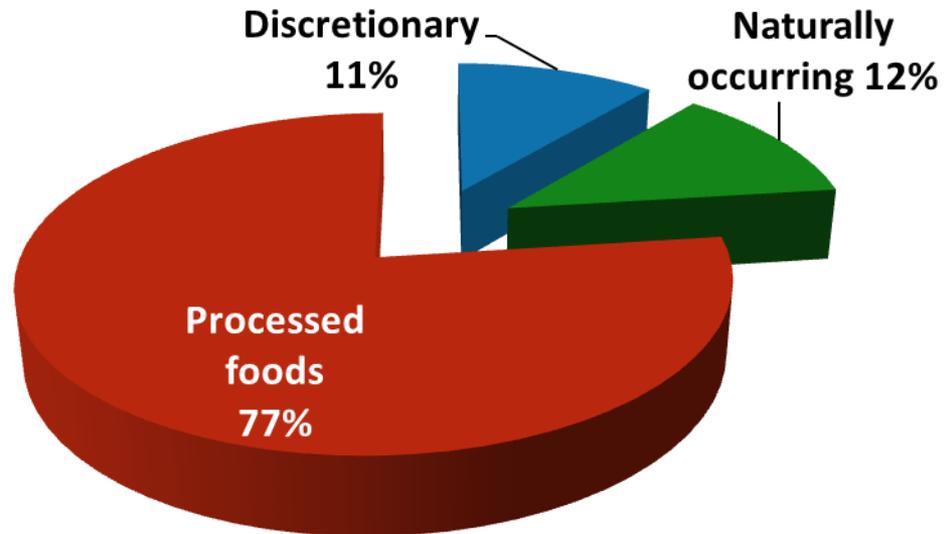


Sodium is a Public Health Issue in Canada:

- excess sodium intake can lead to hypertension, a major risk factor for stroke, heart disease and kidney disease

Canadians are at risk:

- 75% of Canadians exceed 2300 mg sodium/day
  - 2010 Population average intake: 3400 mg/day
  - AI = 1500 mg/day; UL = 2300 mg/day
- ~ 2 million Canadians have hypertension caused by excess dietary sodium

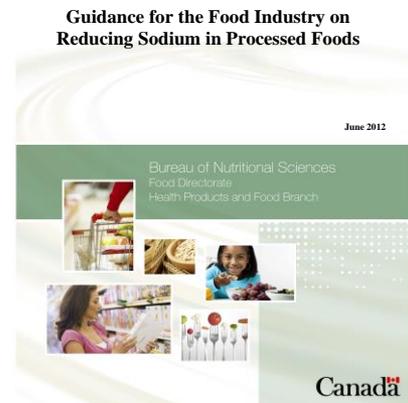
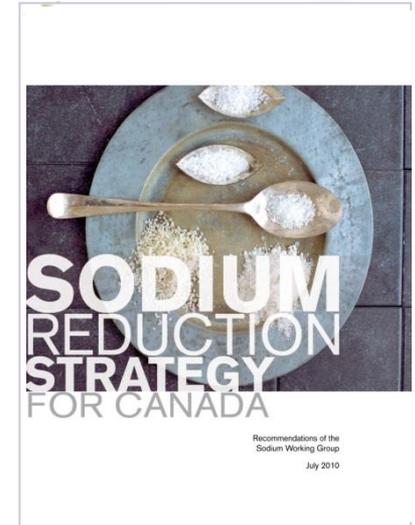


Most sodium comes from a variety of processed foods

# Earlier Actions



- Sodium Working Group established (2007)
- Sodium Reduction Strategy for Canada report sets out recommendations for all key players (2010)
  - F/P/T governments endorse the goal of reducing Canadians' average intake of sodium to 2300 mg / day by end of 2016
- Nutrition Facts Education and Eat Well Campaigns to support consumers in making healthier choices (2010-13)
- Modernized and streamlined process for the food additive approval process and priority handling of lower sodium alternatives (2012-)
- Published voluntary sodium reduction targets for 94 categories of foods (2012)



# Recent Actions



- Mandate commitment to bring in tougher regulations to reduce sodium in processed foods (November 2015)
  - Health Canada will fulfill this commitment by strengthening the voluntary approach and introducing new labelling requirements for foods high in sodium
- Conducted snapshot survey in 15 categories of food to assess progress towards established targets (February-March 2016)
- Held a sodium reduction symposium in Ottawa (October 12 -13, 2016)
- Held pre-regulatory consultations on FOP labelling requirements for foods high in sodium, sugars and saturated fat (November 2016 – January 2017)
- Published final amendments to nutrition labelling regulations, which include standardized serving sizes and updated DV for sodium (December 2016)
- Initiated food label data collection to assess progress (January 2017)

# Sodium Reduction in Foods Symposium



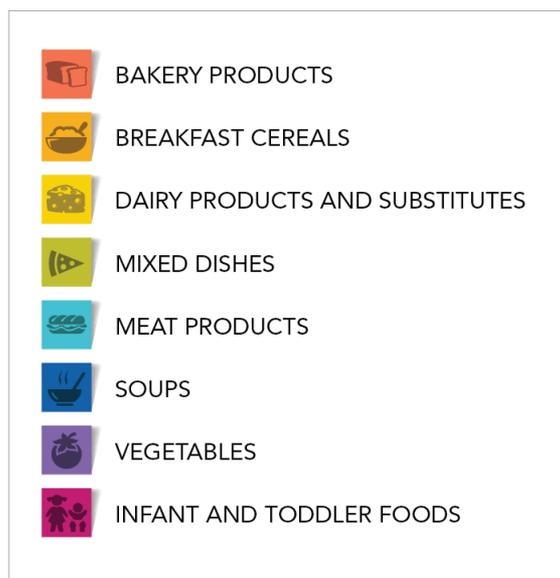
- Objective was to discuss successes and challenges to date and future opportunities
- Common challenges amongst Canadian food industry stakeholders included:
  - consumer acceptance of lower sodium foods;
  - difficulty in replacing salt for flavour and functionality;
  - food safety issues that need to be considered when sodium is replaced
- Sodium reduction in restaurant and foodservices presents additional challenges:
  - Large number of menu items and ingredients and their constant evolution;
  - impact on small and medium businesses;
  - consumer perception of eating out as a “treat”



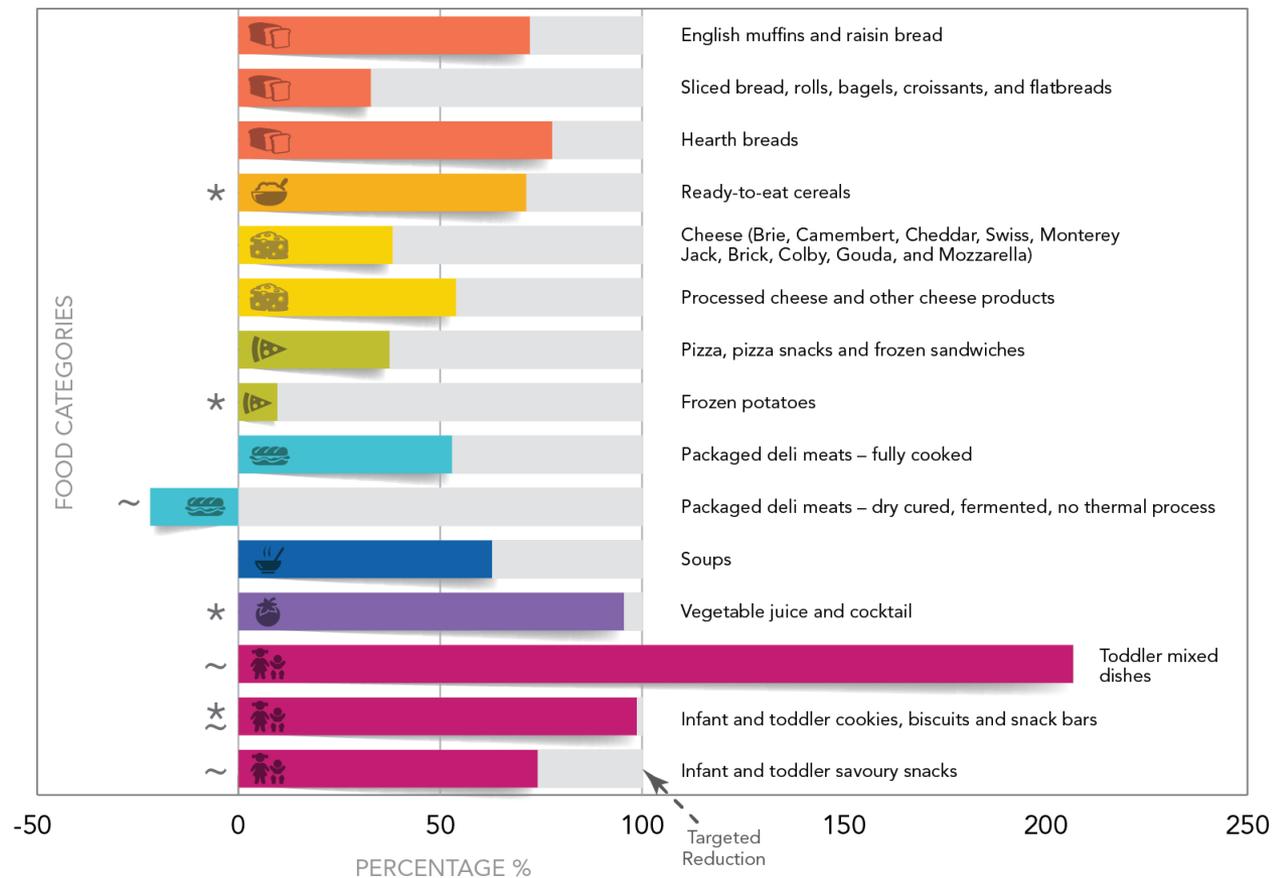
# Progress Towards 2016 Targets



## Progress (%) Towards the 2016 Sales Weighted Average Sodium benchmark Targets



\* Interpret data with caution due to CV > 33.3  
 ~ Interpret with caution due to a small sample size



# Next Steps



- Engage stakeholders on approaches for sodium reduction in restaurants and food service establishments (spring-fall 2017)
- Conduct evaluation of industry's voluntary sodium reduction efforts against established targets (summer 2017)
- Publish report on evaluation outcomes (Fall 2017)
- Publish report on Canadians' intakes of sodium using Canadian Community Health Survey 2015 and food label data (winter 2018)
- Assess needs for revised / new targets and establish process for ongoing monitoring (spring 2018 onward)

# HEALTHY *eating* Strategy

**VISION:** Make the healthy choice the easy choice for all Canadians

Regulations,  
Guidance,  
Education.



Strong  
Evidence-base.



Strategic  
Partnerships.



Engaging  
Canadians and  
Stakeholders.



Openness and  
Transparency.



## Healthy Eating Information

- Revise Canada's Food Guide
- SSB Reduction Campaign

## Protecting Vulnerable Populations

- Restrict marketing of unhealthy foods and beverages to children

## Labelling and Claims

- Update Nutrition Facts table
- Introduce front-of-pack labelling of sugars, sodium and saturated fat

## Nutrition Quality Standards

- Eliminate industrial trans fat
- Reduce sodium

## Access to and Availability of Nutritious Foods

- Improve the Nutrition North Canada program



Nutritious food more readily available and accessible to Canadians.

**MAKE THE  
HEALTHY CHOICE  
THE EASY CHOICE**



Canadians can access, understand and use nutrition information.



Protect and support vulnerable Canadians.

# Thank You!



HES website:

- <http://healthycanadians.gc.ca/publications/eating-nutrition/healthy-eating-strategy-canada-strategie-saine-alimentation/index-eng.php>