Improving Canada’s Eating Environment

Minimizing the influence of commercial interests in healthy public food policies

A Canadian Health Organization Call to Action

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1 Hypertension Advisory Committee Membership does not imply organizational support or approval of this statement.
Statement of Support

Des appuis de taille

The following health care professional, health and scientific organizations, support\(^2\) this Call to action on Minimizing the influence of commercial interests in healthy public food policies

1. Supporting organizations have given permission to use their logo and name for this statement and accompanying communication material. Support by individuals does not imply support by any organization with which they are affiliated.

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**Call to Action:** Minimizing the influence of commercial interests in healthy public food policies

**Issue Statement**

Evidence and population-based interventions to improve diet aim to prevent and control diet-related diseases. Because of competing commercial interests, food and beverage industry influence on nutrition research and in food policy setting has the potential to impact the neutrality of such interventions. The evidence base that informs nutrition policy development must be conflict-free.

This call to action urges the federal government to implement a national conflict of interest framework that enhances transparency and accountability in nutrition-related public policy decision-making.

**Background**

Poor diet, physical inactivity and tobacco use are among the key modifiable risks for cardiovascular disease, diabetes, some cancers and a range of mental health disorders. Poor diet was the leading risk factor for death, disability and life years lost in Canada, with the dominant dietary risk including diets low in fruits and vegetables, high in sodium and low in whole grains. The impact is staggering: in 2010 alone, dietary risks contributed to 65,000 deaths, 864,000 life years lost and over a million years of disability. Foods high in salt, saturated fats, trans-fats and free-sugars have been highlighted by the World Health Organization (WHO) as disease agents due to their prominent and increasing association with illness, death and disability.

In Canada, two-thirds of all deaths are attributable to chronic disease, namely cancer, diabetes, heart disease and stroke. An estimated 40% of Canadians are currently living with a chronic disease, and 80% are at risk of developing one. Modelling estimates suggest that over 30,000 deaths per year could be prevented or delayed if Canadians followed national dietary recommendations, particularly for fruit and vegetables.

Population-policy intervention to improve diet are among the WHO’s key recommendations for global chronic disease prevention. Specific nutrition policies advocated internationally include:

- Reductions in the marketing to children of unhealthy food and beverages
- Policies to reduce dietary sodium, free- sugars and saturated fats with efforts to eliminate trans-fats
- Food taxation and subsidy policies, and
- Harmonized front-of-package nutrition labelling that convey easy-to-understand health implications.

Effective public health and nutrition policy development is a multi-sectoral and multi-stakeholder endeavor. However, there is mounting evidence and concern by health groups world-wide of food industry interference in, and undermining of,
food policies and regulations. As done with tobacco, tactics range from subtle to blatant, from refuting science to active government lobbying against legislative nutrition interventions. Specifically, sodium industry interference in academia and sodium-related research has undermined progress toward population-based sodium reduction interventions, despite such approaches being promoted by the WHO and the World Economic Forum as inexpensive and effective ‘best buys’ to prevent non-communicable diseases.

Partnerships with the food industry or their representatives are not inherently harmful. They do, however, pose inherent risk and need to be carefully managed to support and advance the public health mandate of Canada’s government and non-governmental organizations.

International Responses
Over the last decade, the international health community has issued a series of statements calling for stronger codes of conduct to reduce industry interference in public policies to reduce chronic disease risk factors, namely tobacco use, alcohol misuse and unhealthy diet.

In 2011, the Conflict of Interest Coalition released a Conflict of Interest Declaration calling for “the development of a Code of Conduct and Ethical Framework to help protect the integrity of, and to ensure transparency in, public policy decision-making, by safeguarding against, and identifying and managing conflicts of interest.” Since its release, the statement has been endorsed by more than 160 global public-interest organizations.

With the current funding and political climate in Canada favoring public-private partnerships across all sectors, and with industry groups assuming stronger roles on federally appointed nutrition committees, Canada needs robust conflict of interest procedures which ensures transparency in nutrition research and public policy setting.

Overarching Principles
All government and non-governmental interactions with the food and beverage industry should be:
- Transparent, publicly reported and easily accessible.
- For the purpose of advancing the health of Canadians.
- Based on scientific methodology and evidence and be scientifically valid.
- Ethically defensible.

Recommendations
Federal, Provincial, Territorial Governments
- Develop and implement a conflict of interest framework which include the following measures:
  - Food and beverage industry groups and representatives with conflicts of interest should abstain from voting or decision-making processes on nutrition research and/or policy issues.
  - Committee representatives declare all real or perceived conflicts of interest as a condition for participation in any government health committee. These should be made public and explicitly stated on all resulting communication, including meeting minutes and detailed minutes of such committees should be publicly available.
  - Less than one-third of committee members should have potential conflicts of interest; committee chairs should be free of financial interests.
  - Conflict of interest safeguards should be implemented throughout the duration of government-industry interactions and be independently monitored. Such interactions should end if a conflict or perception of conflict is identified.
- Develop criteria for government funding of public-private partnerships models. Proposals that indicate more than 30% of food and beverage industry funding for public health interventions should be flagged as potentially risky and undergo a secondary, transparent review.
• Develop evidence-review guidelines to ensure all public policy decisions on nutrition issues are free from any real or perceived conflict (i.e., not funded by industry, industry funded groups or paid scientists, not authored by current or former industry experts, researchers or scientists).
• Report annually on all lobbying by food and beverage industry groups and affiliated organizations.

NGOs, Health and Scientific Organizations:
• Call on the Government of Canada to make public the declarations of conflicts of interest of all members of its nutrition policy committees and make detailed minutes of such committees publicly available.
• Implement conflict of interest safeguards and processes to ensure interactions or partnerships with food and beverage industry groups promote the health mission, activities and values of the organization.
• Make information and details of interactions with food and beverage industry groups transparent and public.
• Avoid advertising and offering continuing education or professional development credits for industry-funded training where a conflict of interest exists. 21

Researchers, Journals, and Funding Bodies:
• Advocate for the inclusion of financial, commercial and intellectual interests disclosures in journal abstracts and other publications.
• Implement policies requiring journal reviewers to disclose any conflicts of interest; exclude individuals from peer-reviewing articles associated with stated conflicts. 21

References
   www.healthmetricsandevaluation.org/gbd/visualizations/country.
5. World Health Organization. NCD Global Monitoring Framework: Available at:


