



Health Canada Canada's Food Guide Consultation PHASE 2

WHAT WE HEARD REPORT



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Canada

Health Canada is the federal department responsible for helping the people of Canada maintain and improve their health. We assess the safety of drugs and many consumer products, help improve the safety of food, and provide information to Canadians to help them make healthy decisions. We provide health services to First Nations people and to Inuit communities. We work with the provinces to ensure our health care system serves the needs of Canadians.

This report presents a summary of what we heard from phase two of the consultation on Canada's Food Guide. Ipsos analysed and reported on feedback submitted by participants via an online document between June 10, 2017 and August 14, 2017.

Award date: 26-08-2016
Contract # HT128-16-3182/001/CY
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Également disponible en français sous le titre : Consultation sur le Guide alimentaire canadien PHASE 2 – RAPPORT

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Publication date: March 2018

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ISBN: 978-0-660-25390-9
HC Cat.: H164-207/1-2017E-PDF
HC Pub.: 170465

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EXECUTIVE SUMMARY

Canada's Food Guide provides practical, healthy eating recommendations based on the best evidence, to help Canadians make food choices. Health Canada is revising Canada's Food Guide to reflect new evidence and meet the needs of various audiences who use the healthy eating recommendations.

In support of this initiative, Health Canada commissioned Ipsos to conduct consultations to inform Health Canada's development and communication of healthy eating recommendations.

This report presents the findings of the second open consultation for Canada's Food Guide. It is a synthesis of the feedback received from over 6,000 unique contributors through online discussion forums and one-way feedback collected by Ipsos on behalf of Health Canada.

The objective of the Phase 2 consultation was to get feedback on Health Canada's proposed Guiding Principles and Recommendations.

Overall the Guiding Principles and Recommendations were well received by contributors to the consultation.

Across each of the Guiding Principles and Recommendations the majority of con-

tributors were in agreement with the direction proposed by Health Canada. There were, however, some issues raised from the food and beverage industry regarding a number of the recommendations. Overall, across sectors, there was general agreement for the development of further dietary guidance.

This consultation focused on the core message of the guidance rather than delivery. However, a number of contributors commented on what should potentially be included in the public-facing materials to make sure they are accessible to all Canadians. Suggestions brought up often included amounts and specific food examples of what to include and what to avoid in order to maintain a healthy diet.

Many contributors also raised concerns regarding how these recommendations would be positioned in public facing materials. Some felt that they downplayed the importance of meat and dairy products within a healthy diet. Others felt that perhaps more could be done to emphasize the importance of consuming plant-based foods and plant-based proteins. A few also discussed the inclusion of unsaturated and saturated fats and whether current evidence supports an avoidance of saturated fats.

There were requests for clarity around some of the terms included in the recommendations. Professional and organization contributors indicated that a better understanding of terms like “prepared”, “processed” and “saturated fat” needed to be promoted among the public.

Some contributors, particularly among professionals and organizations, raised concerns around issues of access to healthy foods and the affordability of following these Guiding Principles. While still supportive of the recommendations overall, many noted that it may be difficult for some Canadians to follow these recommendations. They suggested guidance be provided on the best alternatives for these audiences, such as those living in rural and remote communities where processed or prepared foods might be more readily available.

INTRODUCTION

Canada's Food Guide provides practical, healthy eating recommendations based on the best evidence, to help Canadians make food choices. Building on the [2015 Evidence Review](#), Health Canada continues to monitor the most recent evidence on food and health. Health Canada is revising Canada's Food Guide to reflect new evidence and meet the needs of various audiences who use the healthy eating recommendations.

In support of this initiative, Health Canada commissioned Ipsos to conduct consultations to inform Health Canada's development and communication of healthy eating recommendations.

In fall 2016, Health Canada held its first open consultations. [The What We Heard Report](#) summarizes the responses received.

This report presents the findings of the Phase 2 consultation, which included online discussion forums and questionnaires, collected by Ipsos on behalf of Health Canada. The objective of the Phase 2 consultation was to get feedback on proposed Guiding Principles and Recommendations.

FORMAT OF CONSULTATION MATERIAL

The consultation materials were organised into sections according to 3 Guiding Principles and a Considerations section. Within each of these sections:

- general background information was provided;
- the evidence base to support Health Canada's Recommendations was provided as reference material; and
- contributors were asked to read and react to the overall Principle and then comment specifically on each of the draft Recommendations.

The Principles, Recommendations, and Considerations were as follows:

Guiding Principle 1: A variety of nutritious foods and beverages are the foundation for healthy eating

Health Canada recommends:

- regular intake of vegetables, fruit, whole grains and protein-rich foods^[1], especially plant-based sources of protein
- inclusion of foods that contain mostly unsaturated fat, instead of foods that contain mostly saturated fat
- regular intake of water

[1] Protein-rich foods include: legumes (such as beans), nuts and seeds, soy products (including fortified soy beverage), eggs, fish and other seafood, poultry, lean red meats (including game meats such as moose, deer and caribou), lower fat milk and yogurt, cheeses lower in sodium and fat. Nutritious foods that contain fat such as homogenized (3.25% M.F.) milk should not be restricted for young children.



Guiding Principle 2: Processed or prepared foods and beverages high in sodium, sugars or saturated fat undermine healthy eating

Health Canada recommends:

- limited intake of processed or prepared foods high in sodium, sugars or saturated fat
- avoiding processed or prepared beverages high in sugars

Guiding Principle 3: Knowledge and skills are needed to navigate the complex food environment and support healthy eating

Health Canada recommends:

- selecting nutritious foods when shopping or eating out
- planning and preparing healthy meals and snacks
- sharing meals with family and friends whenever possible

Considerations

- determinants of health
- cultural diversity
- environment

WHO WE HEARD FROM

Contributors were asked to register and voluntarily respond to a selection of self-identification demographic questions to:

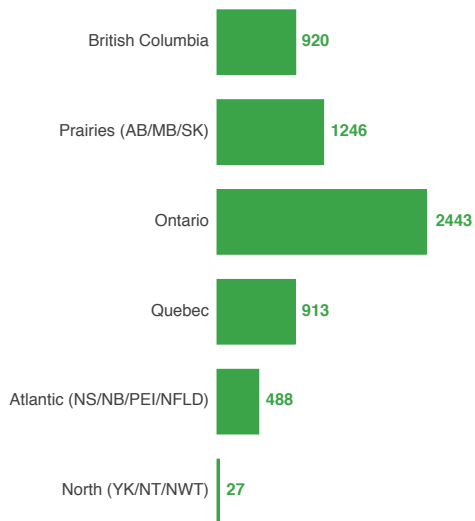
- assist in analysis; and
- ensure a broad range of stakeholders contributed to the consultation process.

Over 6,000 unique contributors came from a variety of backgrounds. They were categorized based on:

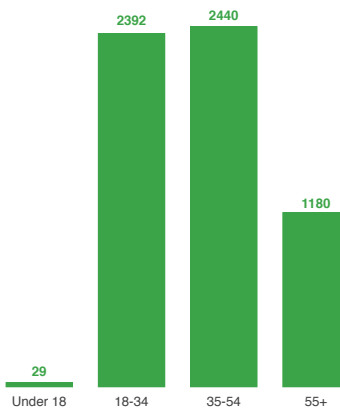
- region
- key sectors
- uses of dietary guidance materials

This data is summarized in Infographic 1.

PROVINCE / TERRITORY



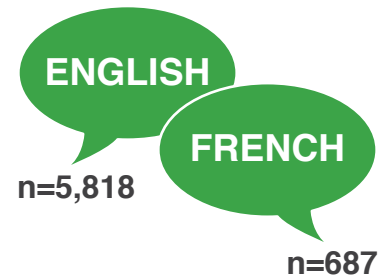
AGE



TOTAL CONTRIBUTORS

6,771

LANGUAGE



GIVING FEEDBACK AS:



As a member
of the public
n=5,193

Main interest in healthy eating recommendations:



Healthy Lifestyle for Family
n=3,767

(Other n=1,061; Prefer not to disclose n=15)



Healthy Lifestyle for Self
n=3,280



As a
professional
n=989

Sector in which professional and organizations work (n=1,159):



Hospitals or other
health care facilities
n=357



Health and nutrition
organizations
n=189



Private practice
or consulting
n=131



Research in an
academic setting
n=40



On behalf of
an organization
n=170



Government
n=105



Schools & daycares
n=103



Food & beverage
industry
n=98



Sports, athletics,
& fitness
n=32

(Other n=78; Prefer not to disclose n=23)



I prefer
not to disclose
n=105

Infographic 1: Consultation contributors demographics

READING THIS REPORT

This report is based on the feedback, ideas, opinions, and perspectives as submitted by contributors to the online public consultation. The consultation included both closed and open-ended questions for consideration. The close-ended feedback is presented within this report as counts (number of mentions), some of which are shown as graphs, for ease of understanding. The numbers of contributions to each question within the consultation varied as questions were not mandatory and could be skipped.

The summary of the discussion presented in this report:

- does not reflect the perspectives of the broader general public;
- should not be considered to be representative of Canadians' views; and
- offers a thematic overview of the feedback that was submitted through the consultation process.

Individuals who participated in the online consultation by submitting comments are referred to in this report as “contributors.”

Contributors include:

General Public

Those who responded to the consultation as a member of the public who use healthy eating recommendations for their own personal use or use by their family

Professionals

Those who responded to the consultation in their professional capacity as a user

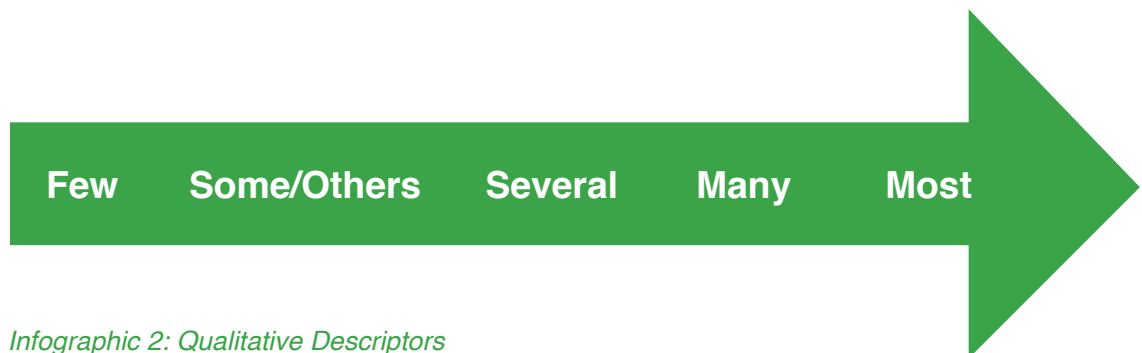


of healthy eating recommendations in their individual work

Organizations

Those who responded to the consultation on behalf of an organization that they represent which uses healthy eating recommendations in the work of the organization (organizational response)

Some qualitative descriptors have been used throughout the report to refer to contributors commenting on the various major themes within the feedback. These include words such as “most”, “many”, “several”, “some”, “others” and “few.” Infographic 2 provides a sense of the degree of separation between these terms. These are not meant, however, to quantify the results. “Some” and “others” have been grouped as they represent similar proportions with opposing or outlying viewpoints within the contributions.



Infographic 2: Qualitative Descriptors

FEEDBACK ON THE GUIDING PRINCIPLES AND RECOMMENDATIONS

General feedback

Several key themes emerged in the feedback highlighting the strengths of the Recommendations and suggestions for improvement. Many contributors reiterated the importance of revising the 2007 Canada's Food Guide and modernizing its Recommendations.

Strengths mentioned by all audiences included:

- the forward-thinking approach
- evidence-based recommendations
- the simplicity of the recommendations
- achievable for the average Canadian

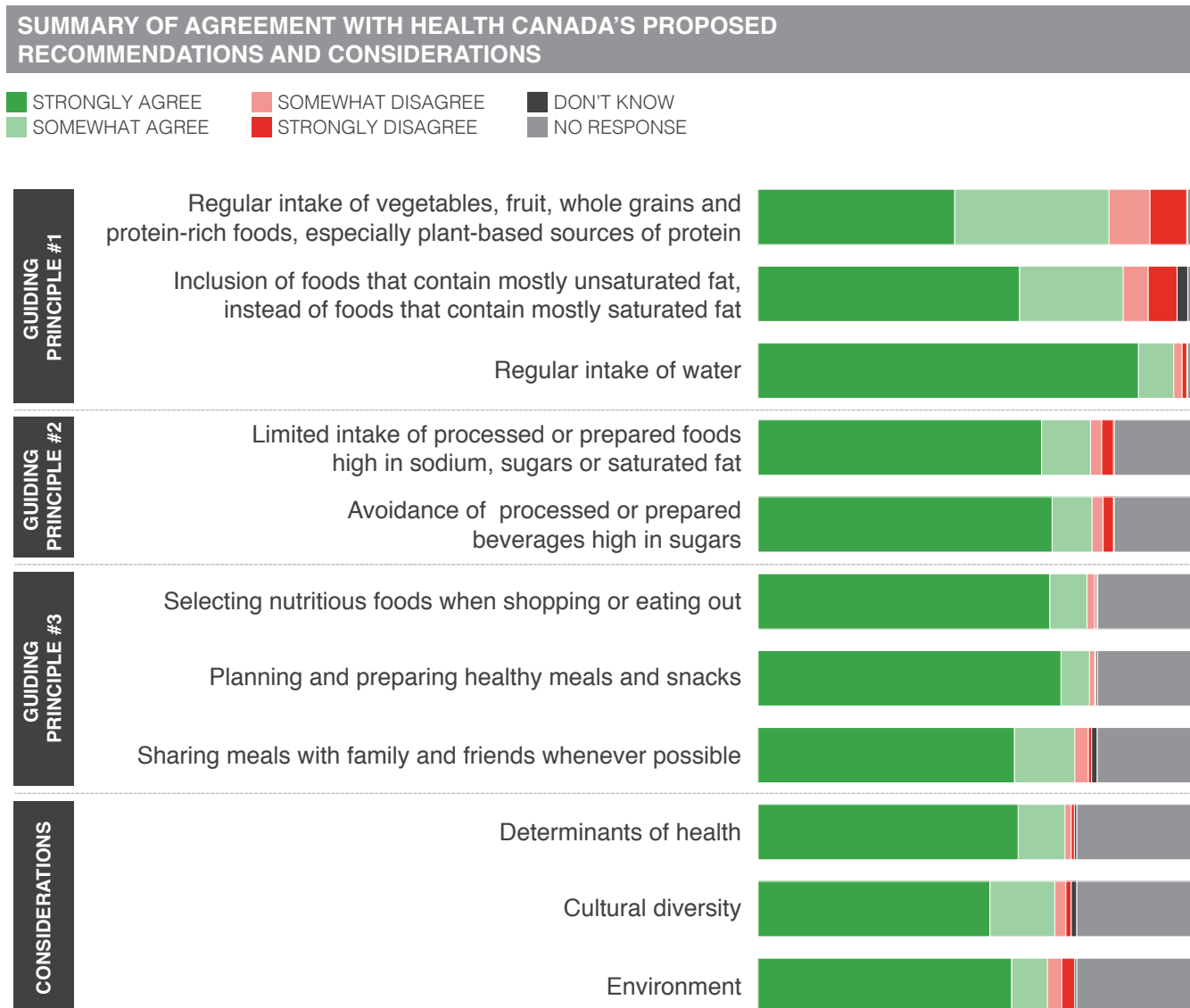


Figure 1: Do you agree or disagree with this recommendation?
Base: All contributors (n=6,202)

A forward-thinking approach

The considerations were seen as a reflection of a broader change in conversation about health policy in Canada. The scope of the approach, beyond just dietary guidelines, was well received for its inclusion of public education and skills development.

Evidence-based recommendations

Many contributors appreciated the science based evidence. A small number of contributors were concerned about the evidence presented and suggested alter-

native sources to support the development of the Guiding Principles and Recommendations.

Simple, clear and easy to understand

Across groups, contributors liked the lists of foods and beverages to avoid or to choose; noting the lists were clear, concise and comprehensive. Contributors indicated that the Guiding Principles and Recommendations provided clear direction. They were also easy to understand for the majority of contributors. However, a few noted the need for definitions and more information to assist in the practical application of the guidance.

Achievable for the average Canadian

Many contributors noted that the recommendations were realistic and helpful in combatting current public health issues.

However, contributors also noted areas for improvement for the proposed Guiding Principles and Recommendations. These included:

- reconsidering language that is not inclusive (such as recommendations that exclude those with particular health conditions, or family situations)
- reconsidering recommendations that may not be realistic for the diverse socio-economic situations of Canadians (for example, those living in northern or remote locations)
- communicating practical considerations for food consumption to accommodate busy lifestyles

Considerations for special audiences

When commenting on the implications of these recommendations for special audiences (such as children and the elderly), some contributors raised concerns about practical considerations. These included:

- access to healthy food
- concerns about the levels of literacy and education on food and nutrition
- the adaptability of the recommendations, given cultural or situational circumstances

To ensure the Recommendations could be implemented with these special audiences, contributors recommended:

- the need to eliminate areas with limited access to nutritious food
- making healthy foods more affordable
- providing nutrition literacy and skills training with clear language and visuals/examples

Other Feedback

The aim of the consultation was to get feedback regarding the proposed Guiding Principles, Recommendations and Considerations. However, contributors expanded their feedback to include other major themes around Health Canada's [Healthy Eating Strategy](#) mandate and future material development process. The key themes regarding the Recommendations that were identified outside of the feedback collected are presented next.

Advice for the development public facing materials

Use of clear language

Contributors in all audiences commented that the language used in the draft Guiding Principles is not inclusive for all Canadians. The general population, for example, may not know the differences between wordings such as:

- 'processed' or 'prepared'
- 'saturated' or 'unsaturated'

The language seemed to lack clarity for some and the terms could be perceived as nutrition jargon by the general population. Contributors responding to recommendations in Guiding Principle 2, in particular, commented that the language describing fats and the accompanying information was not enough to educate Canadians on making healthy choices in their fat consumption. Some suggested that additional lists may be useful.

Examples needed so actions can be taken

Some professionals and organizations commented that more information should be provided about which foods to eat and which to avoid. While Guiding Principle 3 acknowledged the skills required to implement or comprehend the recommendations, professionals and organizations commented there was no information on how to follow through with the Guiding Principle (that is, meal planning suggestions, nutrition programming).

Some commented that the recommendations placed a larger burden on consumers relative to knowledge, skills and purchasing behaviours, rather than on the food industry, government and other key stakeholders. Contributors suggested that an accompanying educational component about nutrition literacy and food preparation could enhance uptake of the recommendations by consumers.

Guiding Principle #1: A variety of nutritious foods and beverages are the foundation for healthy eating

The Guiding Principle and its Recommendations were positively received by many contributors, in particular the emphasis on consumption of plant-based protein, fruits and vegetables and unsaturated fats. Overall, many contributors commented that this Guiding Principle was applicable to their lifestyle.

EVALUATED CHARACTERISTICS OF GUIDING PRINCIPLE #1

A VARIETY OF NUTRITIOUS FOODS AND BEVERAGES ARE THE FOUNDATION FOR HEALTHY EATING.

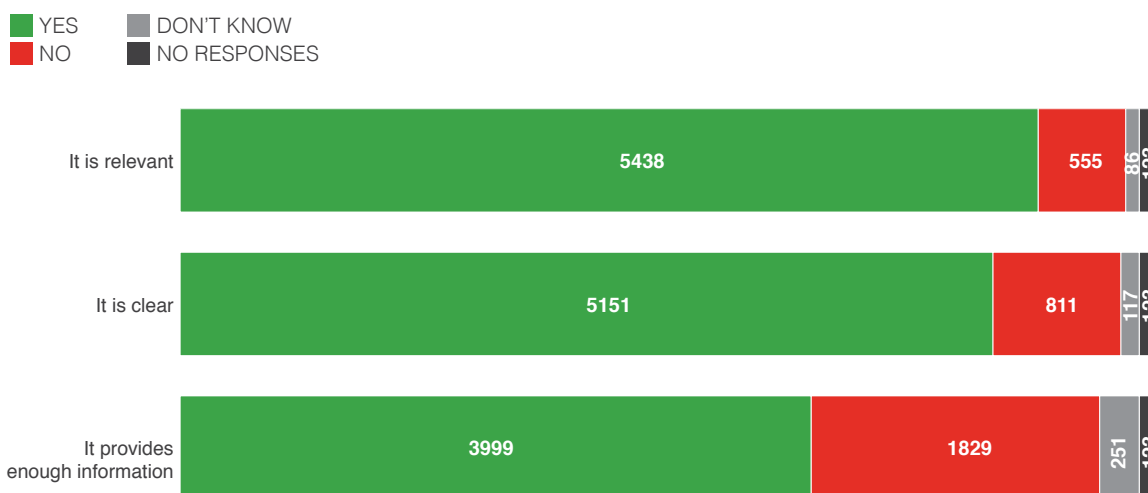


Figure 2: Do you agree with the following statements about this guiding principle?

Base: All contributors (n=6,202)

Most contributors agreed that the Guiding Principle:

- was clear
- was relevant
- provided enough information to understand

Some contributors expressed a need for more information to accompany the Guiding Principle and its Recommendations. They suggested that definitions and more information to assist in the practical application of the guidance would be beneficial.

While most agreed that the recommendations aligned with their understanding of health and nutrition, there were some who thought there should be a greater emphasis on negative effects of meat/saturated fats consumption on health. Other contributors questioned the benefit of recommending lower-fat dairy products and soy.

Recommendation #1: Regular intake of vegetables, fruit, whole grains and protein-rich foods, especially plant-based sources of protein

Most contributors from all audiences agreed with this recommendation.

Many members of the public commented that this aspect of the recommendation:

- was personally relevant to them and their diet
- reflected the diversity in the diets of Canadians
- would have a positive impact on the environment, given the land use and waste products produced from raising animals

Many professionals and organizations liked the focus on:

- whole, unprocessed foods
- the importance of consuming sources of protein rather than separate groupings of meat and dairy products, as in the 2007 Canada's Food Guide

LEVEL OF AGREEMENT WITH RECOMMENDATION #1

REGULAR INTAKE OF VEGETABLES, FRUIT, WHOLE GRAINS AND PROTEIN-RICH FOODS – ESPECIALLY PLANT-BASED SOURCE OF PROTEIN

■ STRONGLY AGREE ■ SOMEWHAT DISAGREE ■ DON'T KNOW
■ SOMEWHAT AGREE ■ STRONGLY DISAGREE ■ NO RESPONSE

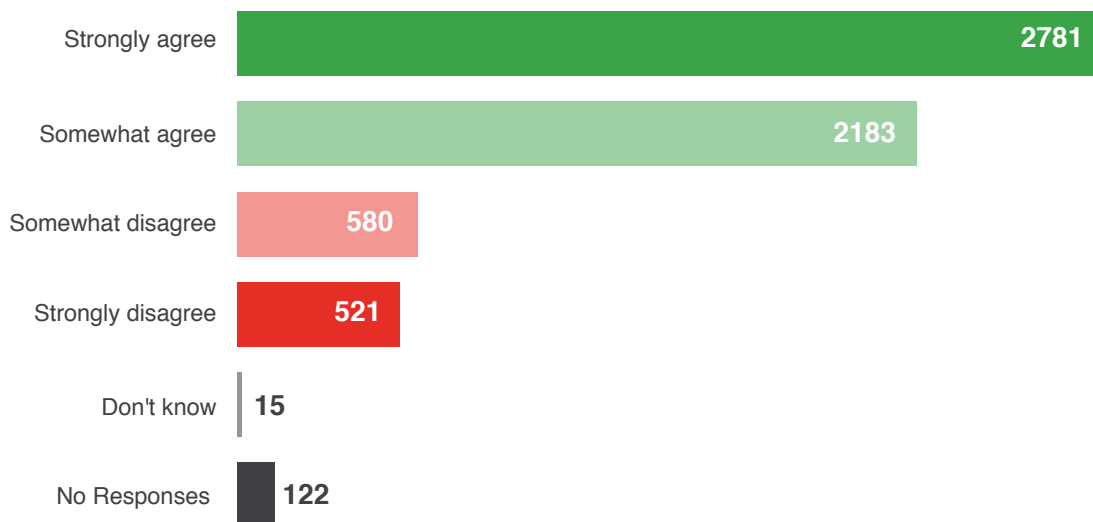


Figure 3: Do you agree or disagree with this recommendation?

Base: All contributors (n=6,202)

While most contributors were very positive about this recommendation, including those in agreement with the overall approach, they shared some aspects or potential implications that they disliked about the proposed recommendations. Contributors' perceptions varied as to the importance of dairy and meat in the recommendation.

Some specific concerns include the lack of:

- clarity or definitions for terms such as:
 - 'fortified'
 - 'whole grain'
 - 'regular intake'
- information about the benefits of different protein sources
- guidance on meat and dairy products that would reduce their consumption and thus compromise intake of important nutrients found in these protein-rich foods

Among those who disagreed, some contributors were concerned about the shift away from animal-based proteins and the increased emphasis on plant-based proteins. The impact on the meat and dairy industries, a perception of a focus on particular lifestyle choices and importance of enjoyable eating experiences were among some of the concerns raised by these contributors.

Recommendation #2: Inclusions of foods that contain mostly unsaturated fat instead of foods that contain mostly saturated fat

Most contributors were also in support of this recommendation. Those who agreed with this recommendation indicated that it is supported by evidence, however a few of those who disagreed contested the evidence that supports this recommendation.

LEVEL OF AGREEMENT WITH RECOMMENDATION #2

INCLUSIONS OF FOODS THAT CONTAIN MOSTLY UNSATURATED FAT INSTEAD OF FOODS THAT CONTAIN MOSTLY SATURATED FAT

■ STRONGLY AGREE ■ SOMEWHAT DISAGREE ■ DON'T KNOW
■ SOMEWHAT AGREE ■ STRONGLY DISAGREE ■ NO RESPONSE

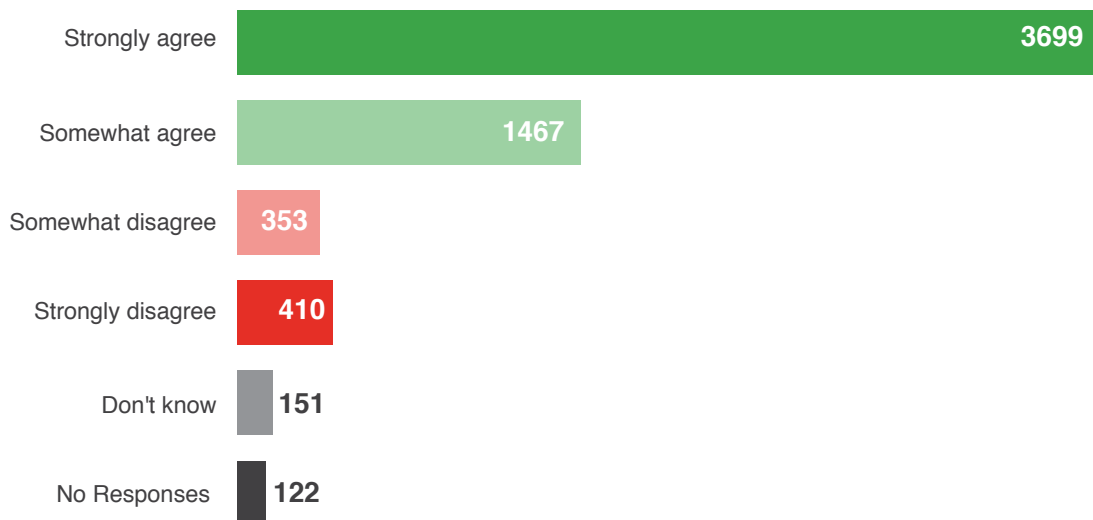


Figure 4: Do you agree or disagree with this recommendation?

Base: All contributors (n=6,202)

Many professionals and organizations, in particular, were in favour of this recommendation:

- for health reasons
- for ethical and environmental reasons

Some members of the public liked the tone of the recommendation suggesting saturated fats be consumed in moderation, rather than vilifying saturated fats.

All contributors were given an opportunity to outline the aspects of the recommendation that they disliked. Some contributors commented that the recommendation:

- could cause consumers to make purchasing decisions based on incomplete messaging

- oversimplifies the differences between saturated and unsaturated fats, as well as trans fats, and can create confusion

Some professionals and organizations noted that there should be more distinction between:

- saturated fats from plants and from animals
- the level of saturated fats between different plant-based foods

While many appreciated the evidence-base presented, a few contributors from all audiences were concerned about the quality of evidence, particularly the sources used when recommending reduced consumption of saturated fats.

Recommendation #3: Regular intake of water

Contributors across all audiences were in support of this recommendation of regular intake of water. For many, the recommendation:

- was:
 - clear
 - simple
 - concise
 - important for a healthy diet
- would discourage the consumption of unhealthy, sugary beverages
- would encourage Canadians to drink water, as well as improve hydration

LEVEL OF AGREEMENT WITH RECOMMENDATION #3 REGULAR INTAKE OF WATER

■ STRONGLY AGREE ■ SOMEWHAT DISAGREE ■ DON'T KNOW
■ SOMEWHAT AGREE ■ STRONGLY DISAGREE ■ NO RESPONSE

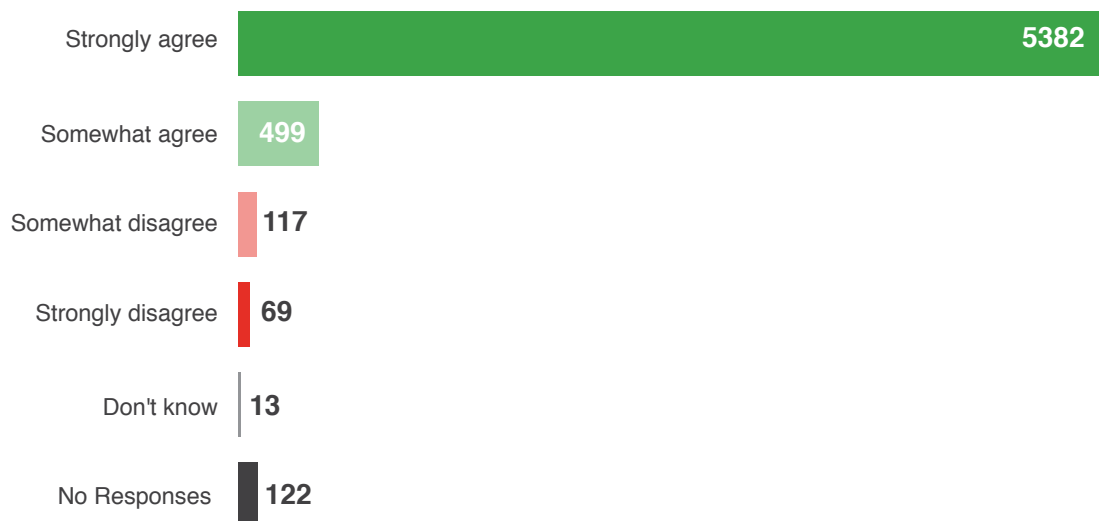


Figure 5: Do you agree or disagree with this recommendation?

Base: All contributors (n=6,202)

For some professionals, this recommendation would lead to healthy eating habits. This recommendation could help reduce obesity by reducing the consumption of unhealthy beverages and large volumes of food. Some professionals and organizations also mentioned the potential economic benefits of consuming tap water, as it is free. Others commented favourably on recommending water intake as a means to improve people's levels of hydration and overall well-being.

As with other recommendations, some of those who agreed with the direction of the recommendation suggested some potential improvements. For instance, some focused on the suggestion of 'regular' intake. Contributors commented that for this recommendation to be actionable, a suggested amount or frequency of water intake was needed. However, many contributors also recognized that the amount of water to be consumed varies according to an individual's specific weight, lifestyle and age, among other things. Several contributors also appreciated the language of 'limit' rather than 'abstain' as they commented it was a more attainable goal.

Some contributors among the members of the public were concerned about the possible contradiction between this recommendation and recommendation 1, which states, "a variety of nutritious foods and beverages are the foundation for healthy eating." Some members of the public commented that more information could be provided on the difference between "intake" and "drink." Some contributors stated clean drinking water is not universally available in Canada and that this should be prioritized if the recommendation is to have wide ranging impact. A few contributors wondered if other water-based beverages, such as herbal teas, could be considered by Canadians to be equally healthy to water.

Guiding Principle #2: Processed or prepared foods and beverages high in sodium, sugars or saturated fat undermine healthy eating

Contributors commented that this Guiding Principle was accommodating and fit well with a number of diverse diets, such as vegan, celiac disease and halal diets. Among the professionals and organizations, some commented that the recommendations were simple and clear.

EVALUATED CHARACTERISTICS OF GUIDING PRINCIPLE #2

LIMITED INTAKE OF PROCESSED OR PREPARED FOODS AND BEVERAGES HIGH IN SODIUM, SUGARS, OR SATURATED FAT UNDERMINE HEALTHY EATING

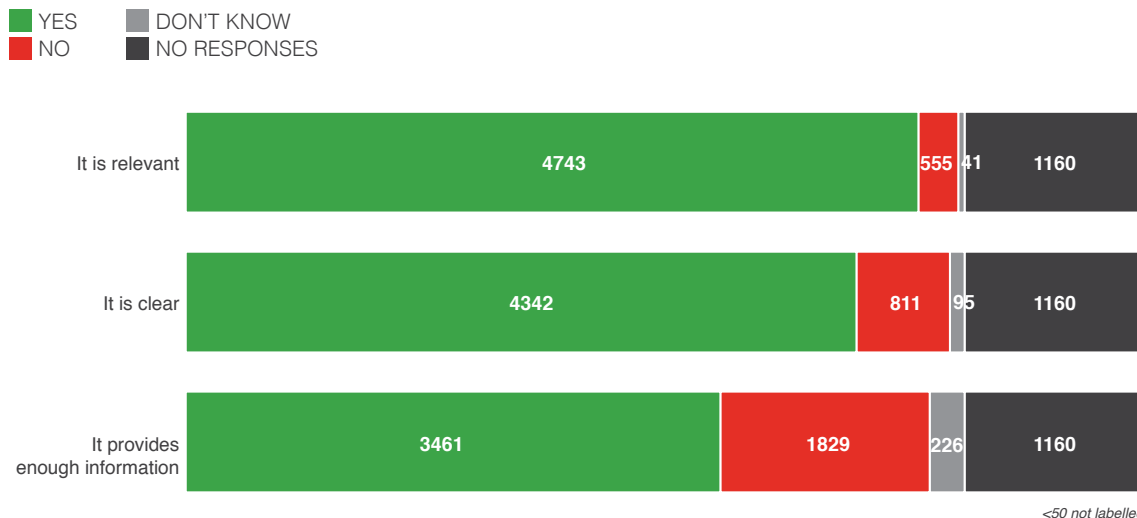


Figure 6: Do you agree with the following statements about this guiding principle?

Base: All contributors (n=6,202)

While most supported the recommendations and the principle itself, many provided constructive feedback to improve messaging. They suggested:

- including lists of foods to give examples for the recommendations
- providing educational resources to support implementation in the lives of Canadians

Recommendation #1: Limited intake of processed or prepared foods high in sodium, sugars or saturated fats

Overall, most contributors agreed with this recommendation and noted the clear and concise language used. Several contributors commented that this advice was part of a healthy lifestyle with wording such as ‘limits’, and some liked its evidence-based background. While some others liked the focus on avoiding processed foods and commented that this was an important point to make when discussing healthy eating.

LEVEL OF AGREEMENT WITH RECOMMENDATION #1

LIMITED INTAKE OF PROCESSED OR PREPARED FOODS HIGH IN SODIUM, SUGARS OR SATURATED FATS

■ STRONGLY AGREE ■ SOMEWHAT DISAGREE ■ DON'T KNOW
■ SOMEWHAT AGREE ■ STRONGLY DISAGREE ■ NO RESPONSE

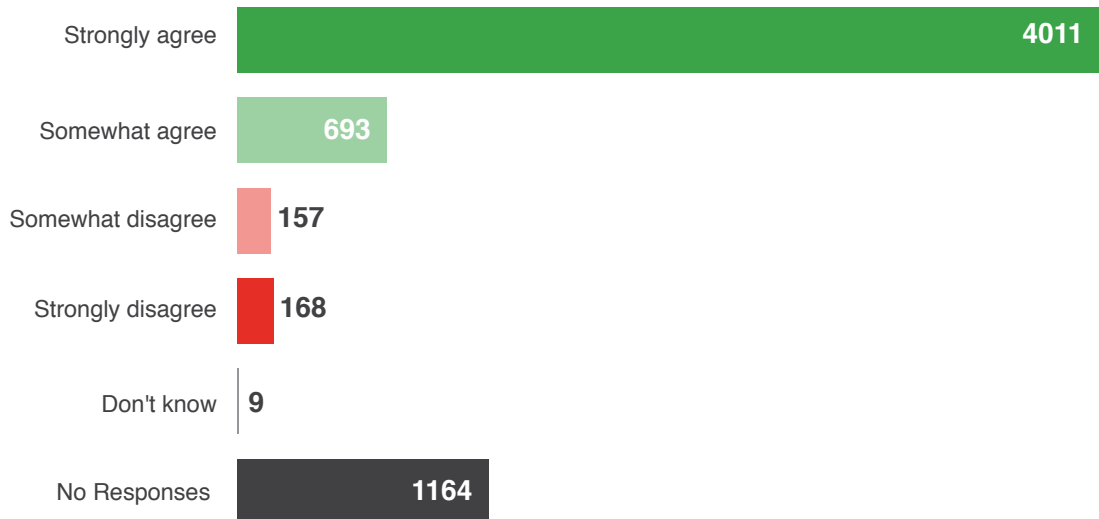


Figure 7: Do you agree or disagree with this recommendation?

Base: All contributors (n=6,202)

Many professional and organization contributors commented that:

- the focus on sodium, sugars and saturated fats in processed foods was relevant
- this recommendation was in line with their work and relevant to their clients/patients

Some contributors went further to call for stricter language to be used in the recommendation, suggesting using “avoid” instead of “limit.”

Some members of the public commented on the language used for the recommendation as they felt most Canadians would not understand the difference between:

- “processed” and “prepared”
- “saturated fats” and “unsaturated fats”

Many professionals and organizations agreed a definition for “processed foods” could be provided in the recommendations, along with a more inclusive list of processed versus unprocessed foods. Other contributors felt that “sugar” needed to be better defined as added sugar rather than natural sugar, for reasons that some natural sugar was viewed as important for a healthy diet.

Many professionals and organization contributors also noted the importance of including further guidance on how to put this recommendation into action. They suggested an educational component, or providing examples and amounts, so Canadians can make informed decisions when purchasing foods and beverages.

Most professionals and organizations also felt strongly that these recommendations were often unrealistic for many Canadians who are unable to afford or access healthy food and beverage alternatives. This was particularly relevant for those who work with specific populations. Canadians living in rural and remote areas rely on processed foods due to issues of:

- access
- affordability
- preservation

Recommendation #2: Avoiding processed or prepared beverages high in sugars

Among all audiences, most contributors agreed with the comprehensive list of beverages that are high in sugars to avoid, including:

- juices
- sports drinks
- plant-based drinks

LEVEL OF AGREEMENT WITH RECOMMENDATION #2

AVOIDING PROCESSED OR PREPARED BEVERAGES HIGH IN SUGARS

■ STRONGLY AGREE ■ SOMEWHAT DISAGREE ■ DON'T KNOW
■ SOMEWHAT AGREE ■ STRONGLY DISAGREE ■ NO RESPONSE

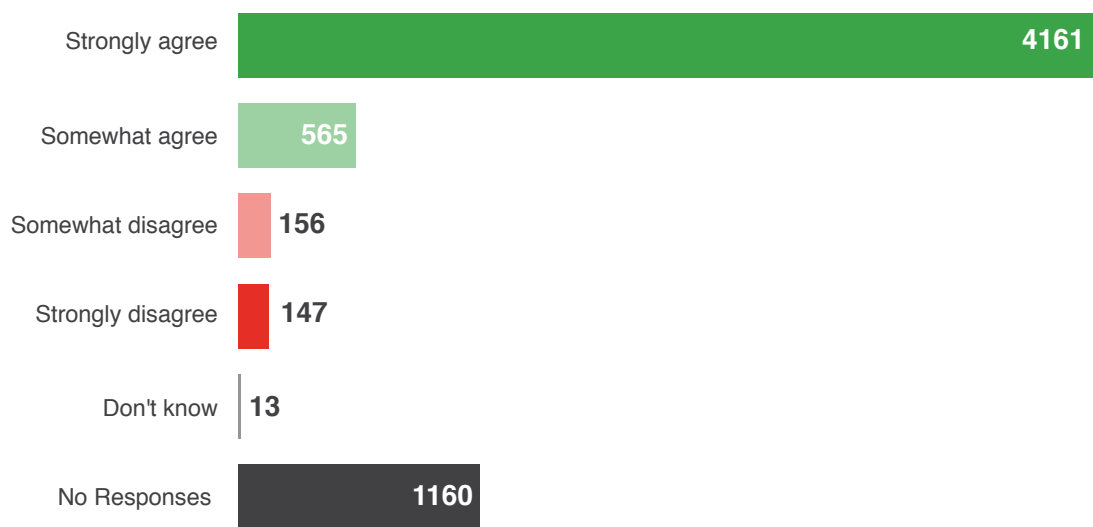


Figure 8: Do you agree or disagree with this recommendation?

Base: All contributors (n=6,202)

Professionals and organizations also commented strongly that these recommendations were often unrealistic to many Canadians who are unable to afford/access healthy foods and beverages. Many worried that fruit juice and flavoured milk are, for some, their only access to fruits and dairy. They wondered if these guidelines would discourage them from consuming these products and thereby potentially limit adequate intake of vitamins and minerals within these products.

Some members of the public expressed similar concerns. Others worried that these guidelines would be discouraging and could make some feel guilty, as they are not able to afford healthier alternatives. Some professionals and organizations also commented there should be a hierarchy of beverages to not equate fruit juice to soft drinks.

Other issues raised included health risks associated with alcoholic beverages. Some contributors were also concerned about the potential implications of artificial sweeteners and other preservatives as not being referred to specifically. They indicated that beverages high in artificial sweeteners should also be included within this list.

Guiding Principle #3: Knowledge and skills are needed to navigate the complex food environment and support healthy eating

Overall, contributors were in favour of this Guiding Principle and its Recommendations, which included different activities relating to food consumption. Contributors from the public, professionals and organizations were pleased with the inclusion of aspects of healthy eating that acknowledge a healthy eating lifestyle. On the other hand, contributors noted the difficulty in implementing the recommendations, given the diverse barriers for Canadians. Some suggested that support may be necessary for some Canadians to achieve the goals of this Guiding Principle.

EVALUATED CHARACTERISTICS OF GUIDING PRINCIPLE #3

KNOWLEDGE AND SKILLS ARE NEEDED TO NAVIGATE THE COMPLEX FOOD ENVIRONMENT AND SUPPORT HEALTHY EATING.

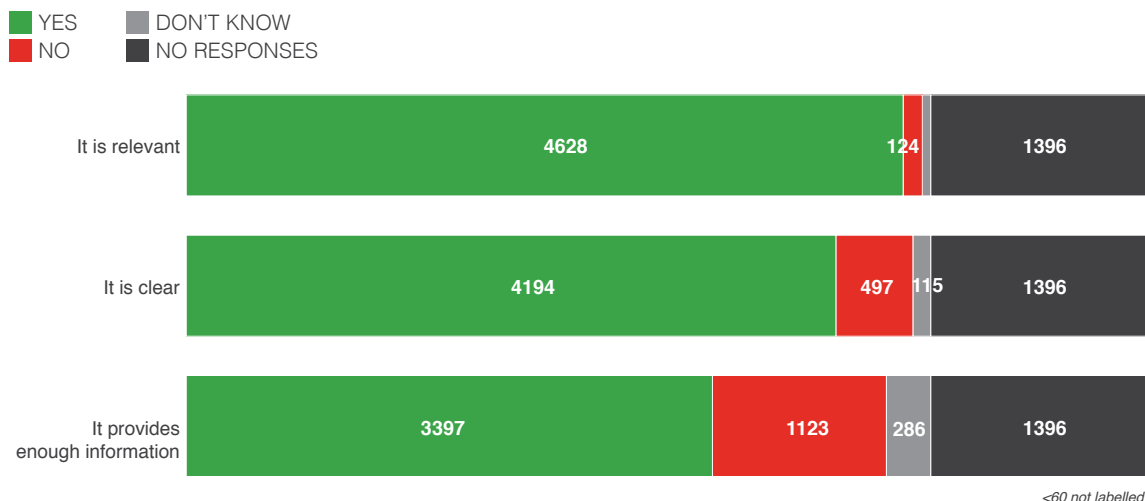


Figure 9: Do you agree with the following statements about this guiding principle?

Base: All contributors (n=6,202)

Recommendation #1: Selecting nutritious foods when shopping or eating out

Positive comments noted the mindful eating approach^[1], which acknowledges the broader picture of healthy eating. For most professionals and organizations, this recommendation made sense and acknowledged the decisions Canadians make when choosing to consume healthy and nutritious foods given their busy lifestyles. Many members of the public liked the clear, simple wording and commented that the recommendation made it easy to understand what was being asked of them.

[1] Mindful eating is the practice of slowing down while eating by paying close attention to the act of eating, concentrating on chewing and tasting the food and/or beverage.

LEVEL OF AGREEMENT WITH RECOMMENDATION #1
SELECTING NUTRITIOUS FOODS WHEN SHOPPING OR EATING OUT

■ STRONGLY AGREE ■ SOMEWHAT DISAGREE ■ DON'T KNOW
■ SOMEWHAT AGREE ■ STRONGLY DISAGREE ■ NO RESPONSE

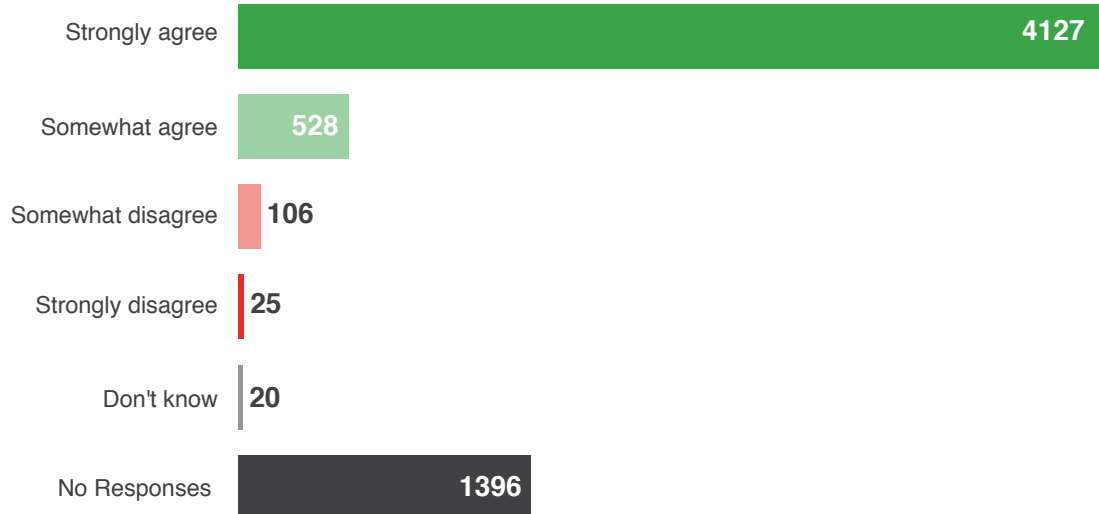


Figure 10: Do you agree or disagree with this recommendation?

Base: All contributors (n=6,202)

Suggestions for improvement to this recommendation were similar across all audiences. Many contributors commented that the recommendation, while simple, lacked clarity and the information necessary to put into action. Some members of the public commented that without a definition of “nutritious” this recommendation did not provide enough information while some professionals and organizations described the recommendation as overly simple, high-level and vague.

Some contributors were concerned that a greater knowledge of nutrition would be needed to make informed decisions. Some members of the public commented that an education component was important for this recommendation. Some professionals and organizations commented that this recommendation:

- would be successful if it gained industry support
- would be understandable to many Canadians but difficult to achieve due to issues with:
 - lack of time
 - affordability
 - lack of knowledge of food preparation

Recommendation #2: Planning and preparing healthy meals and snacks

Most contributors noted this recommendation was important to include and acknowledge. It added to the inclusion of nutrition information, as seen in previous Guiding Principles and Recommendations. In particular, both members of the public and professionals and organizations commented that food planning and preparation:

- was an important behaviour of healthy eating
- could make healthy eating overall a more attainable goal for many Canadians

LEVEL OF AGREEMENT WITH RECOMMENDATION #2 PLANNING AND PREPARING HEALTHY MEALS AND SNACKS

■ STRONGLY AGREE ■ SOMEWHAT DISAGREE ■ DON'T KNOW
■ SOMEWHAT AGREE ■ STRONGLY DISAGREE ■ NO RESPONSE

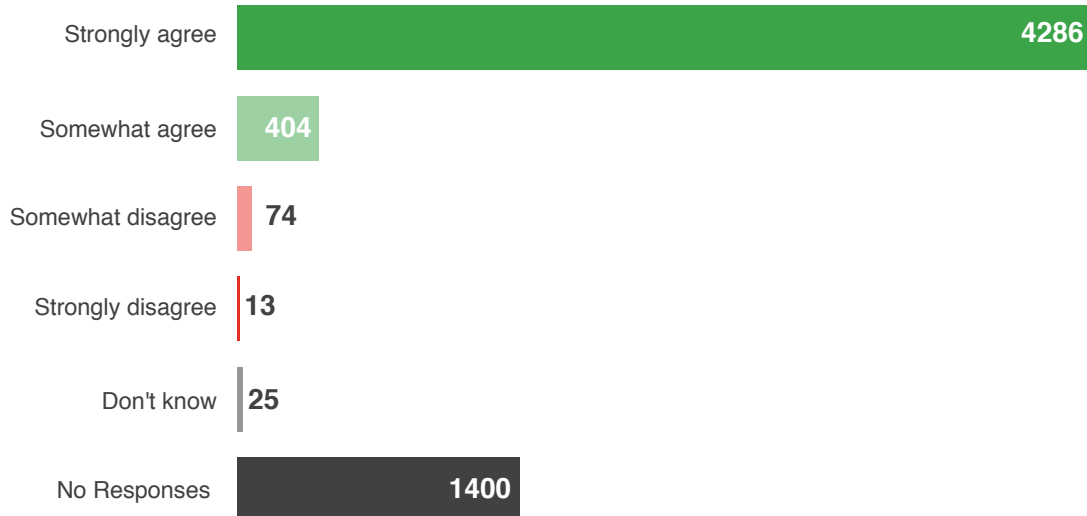


Figure 11: Do you agree or disagree with this recommendation?

Base: All contributors (n=6,202)

Some professionals commented that this recommendation translated previous Recommendations into practice, and acknowledged the challenges of executing healthy food behaviour. Members of the public liked the acknowledgement of snacks as applicable to the average dietary lifestyle of Canadians.

As with the previous recommendation, members of the public commented that this recommendation:

- lacked concrete instructions on “how” to implement this recommendation
- assumes a basic knowledge of food preparation and skills held by all Canadians

- raised concerns about what this means for Canadians and how their current lifestyles need to shift to accommodate this recommendation

For this reason, some professionals and organizations described this recommendation as broad and commented that it did not adequately acknowledge:

- time pressures
- support systems
- individual lifestyles
- cultural aspects of eating out
- the potentially overwhelming nature of this recommendation

Suggestions for improvements to this recommendation were to provide examples of support for Canadians to achieve this recommendation. Some examples included education initiatives, as well as information on how to overcome/mitigate the variety of challenges preventing Canadians from achieving this recommendation. This included barriers such as lack of:

- time
- skills
- access
- knowledge
- food environment

Recommendation #3: Sharing meals with family and friends whenever possible

Many contributors were in favour of this recommendation because of its acknowledgement and emphasis on the community/social and cultural aspects of eating. For professionals and organizations, many commented that this recommendation:

- can help to reduce social isolation
- acknowledges the emotional elements of eating
- encourages people to reconnect with each other, which is beneficial for overall health
- encourages healthy eating practices to be passed on to children and future generations

For members of the public, many viewed sharing meals with others as a way to:

- foster positive relationships with food and food consumption
- address aspects of healthy eating, including accountability and planning, as well as enjoying the mental health benefits of being part of a community

LEVEL OF AGREEMENT WITH RECOMMENDATION #3 SHARING MEALS WITH FAMILY AND FRIENDS WHENEVER POSSIBLE

■ STRONGLY AGREE ■ SOMEWHAT DISAGREE ■ DON'T KNOW
■ SOMEWHAT AGREE ■ STRONGLY DISAGREE ■ NO RESPONSE

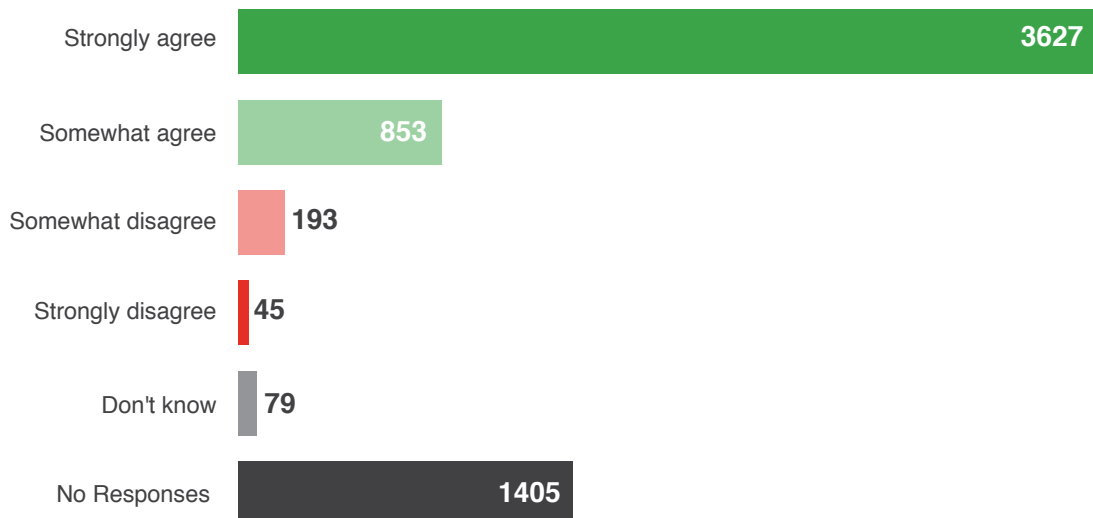


Figure 12: Do you agree or disagree with this recommendation?

Base: All contributors (n=6,202)

Considerations for individual lifestyles and the variety of barriers to this recommendation were the main concern for both members of the public and professionals and organizations.

Specific concerns included:

- the tendency to over-eat/over-indulge when eating with others
- the assumptions that all Canadians have family and friends with whom they can share meals
- the recommendation being interpreted as sharing food, which presents an added cost that is not feasible for some
- those who live alone, in particular with specific groups such as seniors, who have no tangible way of achieving this recommendation

A few professionals and organizations noted the recommendation does not include an explanation of the actual benefits of eating together, in terms of health. Some would prefer this link be made more explicit.

CONSIDERATIONS

Contributors were also asked about the determinants of health, cultural diversity and the environment as considerations that should be taken into account when recommending nutritional health practices to Canadians.

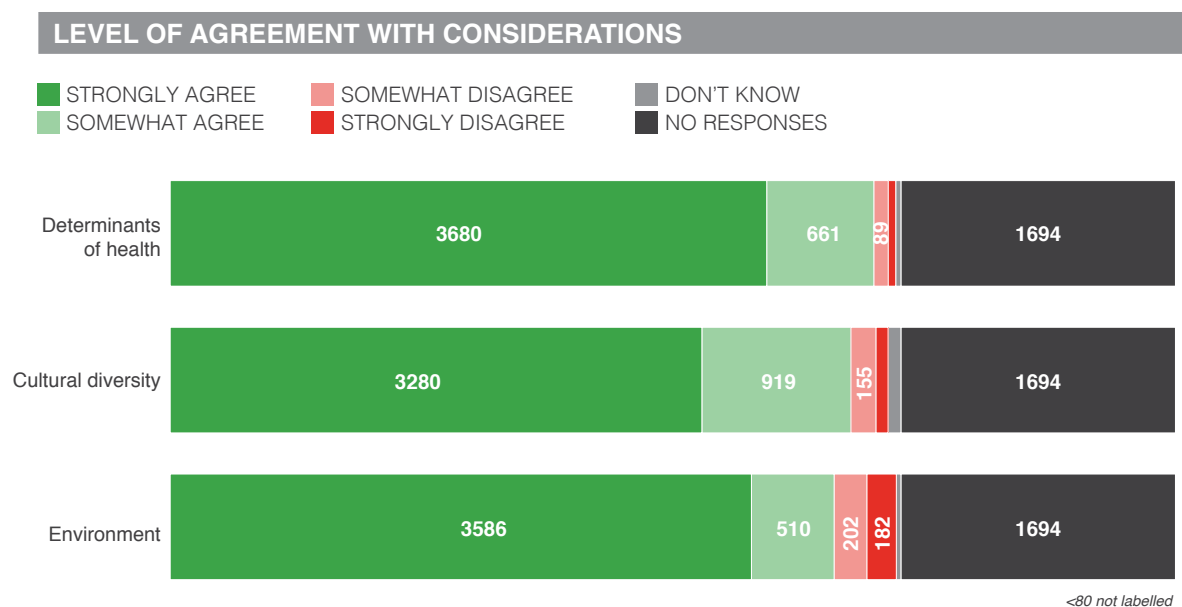


Figure 13: Do you agree or disagree with these considerations?
Base: All contributors (n=6,202)

The considerations were accepted by most contributors among all audiences as:

- clear
- inclusive
- conscious of environmental and ethical impacts
- a step in the right direction regarding the discussion of health in Canada

In the close-ended questions contributors overwhelmingly agreed that these considerations were important to take into account when providing nutrition recommendations to Canadians. Similar sentiments were observed in the discussion that followed, with most contributors positively acknowledging their inclusion in the proposed healthy eating guide.

In particular, many contributors commented that the recommendations were:

- respecting differences in cultural food preferences
- inclusive to all Canadians, highlighting the complexity and diversity of Canadian diets

Some professionals and organizations described this as a holistic approach to nutrition and commented that this was well thought out.

Some contributors also acknowledged that these considerations were an important aspect in relation to healthy eating education and important dialogue that should be part of discussions around nutrition. For many contributors, healthy eating was identified as part of an overall understanding of a healthy lifestyle, including:

- cultural influences
- awareness about environmental impact
- an acknowledgement of the wider picture of healthy eating

The articulation of these considerations positively denoted a forward-thinking approach that is part of a broader policy shift and conversation about health in Canada.

The inclusion of these considerations was seen as forward-thinking and positive. However, a main concern from many professionals and organizations was that the considerations were not integrated into the Guiding Principles. This created a disconnect for them, between the considerations and the dietary guidance. Some noted that more information was preferred, while others noted that the ability of the public to comprehend large amounts of information may compromise understanding and use of the dietary guidance. The main concern for members of the public was the lack of clarity on how to apply these considerations into daily life.

For some, this meant:

- considerations for the inequity of the food environment in Canada
- more information on how to find healthy food options in their current environment
- more information on how to choose foods that did not have significant environmental impacts
- considerations for dietary restrictions beyond cultural preferences such as allergies and food or nutrient intolerances

The consideration concerning the environment saw more disagreement than the other considerations. While most agreed with the inclusion of the environment within these considerations, many disagreed for various reasons, including:

- some disagreement regarding the evidence base used to support this recommendation.
- a few indicating that sustainability is a complex issue that is perhaps better addressed within another policy mechanism
- a few identifying that the consideration should instead encourage public to explore the origins and process of food production of various sources

Many of those who disagreed were concerned about the focus on the negative impacts of animal-based foods. They indicated that the detrimental environmental effects of some plant-based foods should be included or that the consideration should allow for more variation within the environmental footprint of animal-based foods, noting for instance seafood may have a smaller environmental footprint than other animal-based foods.

Others suggested further considerations to be included within the list. A few indicated that there could be a broader discussion on animal cruelty and the source of food. Some contributors commented that more could be done to acknowledge:

- the influence of industry and special interest organizations
- the impact of the food industry on food production and drivers of food choices at grocery stores and restaurants
- aspects of healthy eating that could not be avoided or controlled by individuals such as the:
 - high cost of food
 - marketing of food

SPOTLIGHT ON PROFESSIONAL AUDIENCES

Throughout the report, the focus has been on the overall reactions of the public as well as professionals and organisation responses. Within the professionals and organizations there are a number of different groups whose opinions differ regarding the Guiding Principles and Recommendations. The variations between these groups are noted below.

SECTOR IN WHICH PROFESSIONAL AND ORGANIZATIONS WORK (n=1,159)

Industry:

Food and beverage industry



n=98

Academia:

Research in an academic setting



n=40

Health & Nutrition Professionals & Organizations:

Health and nutrition orgs, private practice or consulting and sports, athletics and fitness



n=352

Public Sector:

Government, hospitals & other health care facilities, schools & daycares



n=565

Health and Nutrition Professionals and Organizations

The opinions of contributors in this section are a summary of the responses heard by those who self-identified as health professionals and organizations. These individuals include nutrition professionals, non-profit organizations promoting healthy eating, and children's health charities as well as sports, athletics and fitness professionals.

Overall contributors from these groups agreed with the guiding principles, though there was less agreement with the first Guiding Principle. This was reflected in the comments where contributors in this section highlighted the need for additional information and clarity of nutrition terms.

HEALTH AND NUTRITION PROFESSIONALS AND ORGANIZATIONS AGREEMENT WITH HEALTH CANADA'S PROPOSED RECOMMENDATIONS AND CONSIDERATIONS

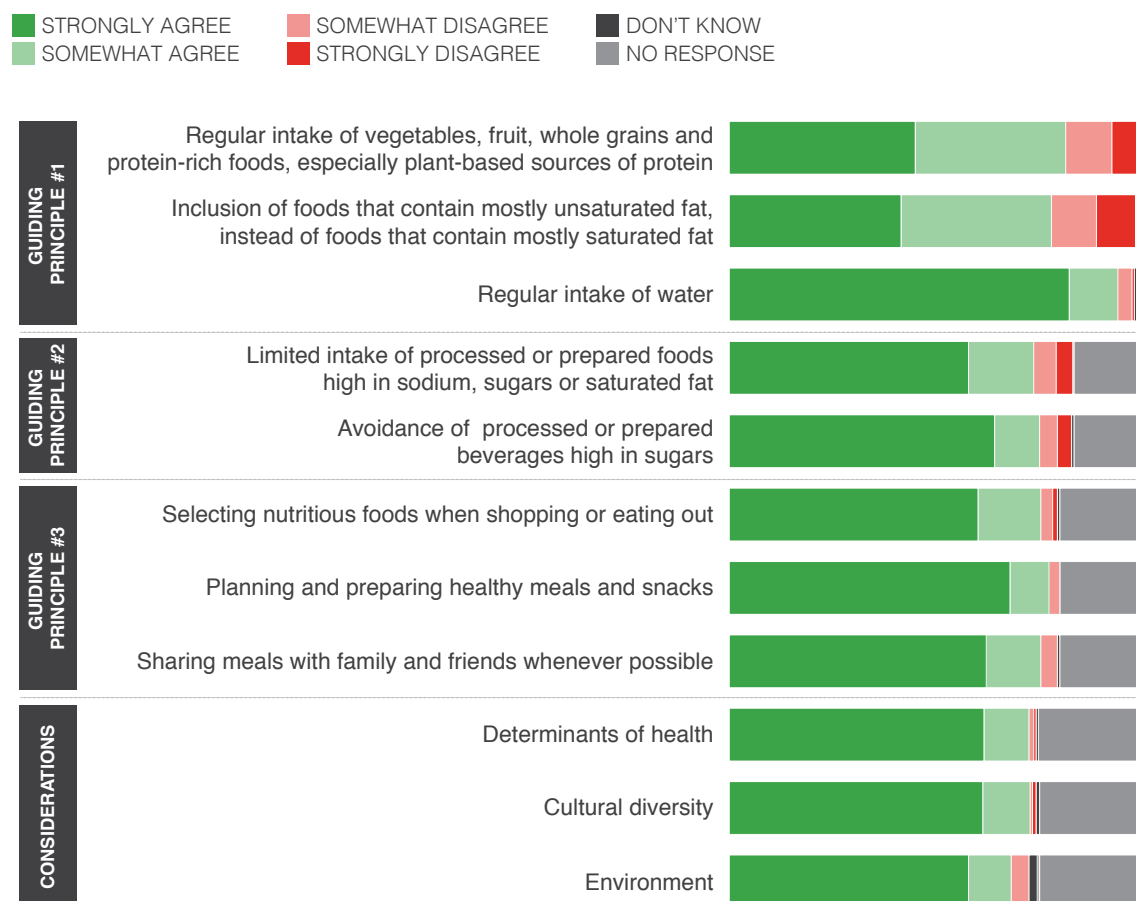


Figure 14: Do you agree or disagree with this recommendation?

Base: Health and Nutrition Professionals and Organizations (n=352)

Most contributors who self-identified as health/nutrition organizations liked the presentation of nutrition information such as the food groups and nutritional content recommendations from Guiding Principle 1. Those in this sector indicated that the recommendations were part of a positive shift incorporating all aspects of healthy eating habits, such as the social aspects. Some suggested that more examples, education campaigns and teaching of practical skills could accompany these recommendations through additional policies and programs. Contributors in this group were more concerned about food security and the financial capabilities of Canadians to achieve these recommendations. Some were concerned about whether the messages were comprehensible for all Canadians.

Overall, the information presented in the recommendations was agreed upon by those in the private practice/consulting sector. Contributors in this sector liked the nutrition information provided within the recommendations. This group supported the recommendations in Guiding Principle 3, but suggested the way the message was presented could be clearer and tailored so it was comprehensible to all Canadians. Some suggested this could be done through other policy considerations and programs, similar to suggestions from other sector groups.

Contributors who self-identified as being from the sports sector (such as personal trainers, and physiotherapists) were particularly favourable to Guiding Principle 1, and were favourable to the Guiding Principles in general. Overall, these contributors agreed with the information in the recommendations, with suggestions for delivery of the messages and the clarification of information to increase uptake. Some suggestions included:

- more information on healthy fats
- a recommended daily intake of water per day
- practical applications and considerations for implementing lifestyle recommendations such as those in Guiding Principle 3.

Recommendations that discussed a healthy lifestyle were more likely to have generally positive comments from this sector, compared to other sectors who were more concerned about the specific details of lifestyle recommendations.

Public Sector

The public sector audience included contributors who self-identified as working for a government, including municipal, provincial, and federal, as well as those working in hospitals, schools and daycare centers. Overall, participants in this section were in favour of all of the Guiding Principles. Specific recommendations

such, as regular intake of water in Guiding Principle 1, were agreed upon by most contributors. Other Guiding Principles, which relied on nutrition information were also favoured, with participants suggested more information could be included.

Most contributors within this audience were in favour of more specifications when it came to food and ingredients to avoid and those to include. When discussing special audiences, public sector respondents felt that more clarification and specific examples could be provided so they recommendations were applicable to as many individual lifestyles as possible, as well as simplifying the wording so the recommendations can be more accessible.

PUBLIC SECTOR AGREEMENT WITH HEALTH CANADA'S PROPOSED RECOMMENDATIONS AND CONSIDERATIONS

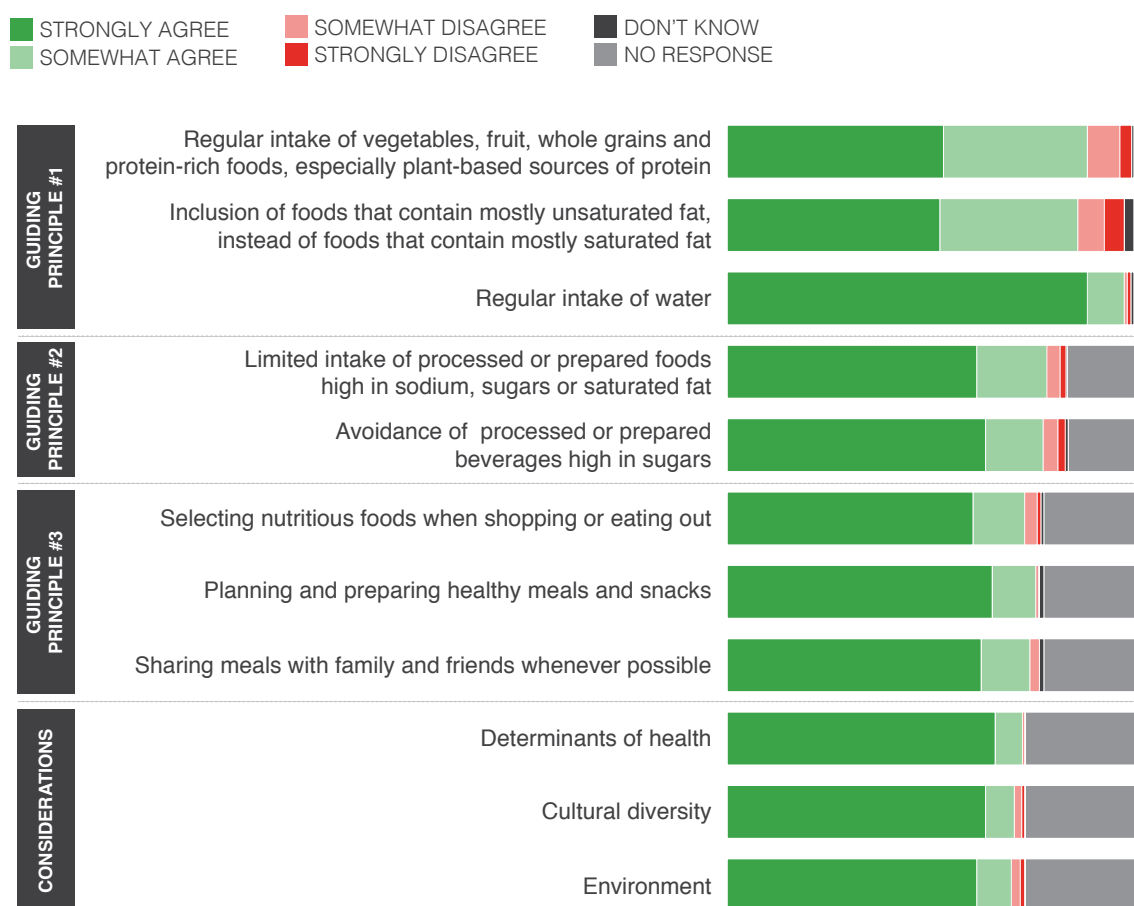


Figure 15: Do you agree or disagree with this recommendation?

Base: Public Sector (n=565)

Contributors who identified as working for a government were overall in favour of the recommendations. Contributors liked the nutrients and food groups highlighted in Guiding Principle 1, however a few suggested emphasising the inclusion of plant-based proteins rather than highlighting them “especially”. A few also commented on the current protein-rich Canadian diet and suggested that more emphasis should be placed on whole grains and vegetables. They were also favourable towards the recommendations and the level of detail and examples provided in Guiding Principle 3.

Suggestions included:

- additional definitions for terms such as “healthy eating”
- more examples of foods to avoid and include in a healthy diet

Others noted that factors such as food security and individual lifestyles/needs could be taken into consideration with additional policies and programs to support the Guiding Principles.

Overall, the messages in the Guiding Principles and Recommendations were supported by those who identified as being from hospitals or health care facilities. Aspects such as a healthy eating lifestyle touched on in Guiding Principle 3 were well-liked by these groups, as well as those aspects that discussed the nutrition content of healthy food. Suggestions from these groups revolved around a need for increasing the number of examples, practical application information, and knowledge and teaching of skills that are included in the recommendations. Other recommendations included more information on foods that are recommended rather than foods that are not. Based on the specific audiences they work with, their concerns revolved around the barriers of food security in achieving these recommendations, as well as increasing the clarity of the messaging to be understood by all audiences.

Of all the sectors, those in the schools/day care sector were most in favour of Guiding Principle 1. Contributors in this sector liked this recommendation for its focus on nutrition content. Some added that an educational component could be included to teach children and others about this information. Other suggestions included changes to the message delivery, such as providing more examples and including additional information/examples to increase clarity of the recommendations. Contributors from this sector also liked the healthy lifestyle aspects of this consideration such as recommendations both for eating out and preparing one’s own meals.

Research in Academia

Contributors in this section include university researchers, professors and scientists. Among research/academia, contributors were overwhelmingly positive about the guiding principles and recommendations. A small number of contributors from academia expressed concerns regarding the inclusion of processed foods, with some commenting on the level of detail and method of communication rather than the actual inclusion of these types of food.

ACADEMIC RESEARCHERS' AGREEMENT WITH HEALTH CANADA'S PROPOSED RECOMMENDATIONS AND CONSIDERATIONS

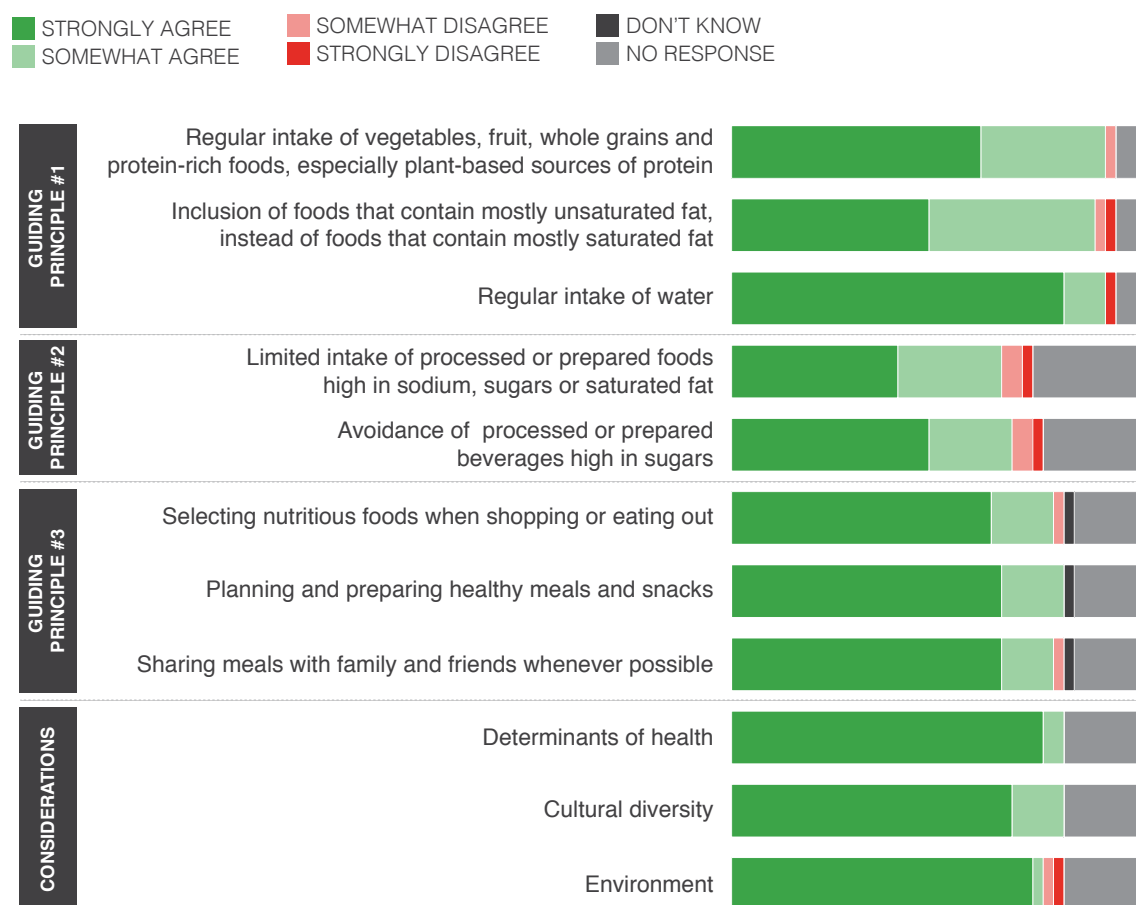


Figure 16: Do you agree or disagree with this recommendation?
Base: Research and Academia (n=40)

Overall contributors from this group were in favour of the Guiding Principles, showing similar levels of support with other groups, except Guiding Principle 2. Contributors in this group favoured the considerations section as they liked the inclusion of accommodations and understanding of different cultural and situational aspects that impact healthy eating.

Contributors from academia focused their feedback on the nutrition information provided in the recommendations rather than the delivery of the messages. This focus was in contrast to contributors in government, hospital/health and health and nutrition organizations. Research/academia contributors:

- particularly liked the level of detail regarding nutrition information provided in some recommendations
- suggested the level of detail could be higher in the recommendations within Guiding Principle 2

This sector also commented on the need to prioritize policy and program considerations to support these recommendations. They were also adamant about the inclusion of cultural considerations.

Food and Beverage Industry

Members of the food and beverage industry were more divided concerning the Guiding Principles and Recommendations proposed by Health Canada. While many agreed with the principles, there was more disagreement among this audience than others. The focus on plant-based protein, limit on saturated fats, limits on processed foods and inclusion of considerations for the environment were the most divided topics. Contributors from these sections felt these recommendations could focus too much on specific aspects of a food or beverage product, rather than whether the product overall was healthy. These contributors felt the overall health impact of a product should be discussed when talking about healthy foods, rather than just the specific nutritional information highlighted in these recommendations.

Those who appreciated the guiding principles noted that they liked the encouragement of healthy eating habits, addressing different dietary habits such as eating out, eating in and snacking, and promoting the consumption of water.

Overall, this group was less likely to agree with the Guiding principles, though the recommendation of regular intake of water saw higher levels of agreeance similar to other groups.

FOOD AND BEVERAGE INDUSTRY AGREEMENT WITH HEALTH CANADA'S PROPOSED RECOMMENDATIONS AND CONSIDERATIONS

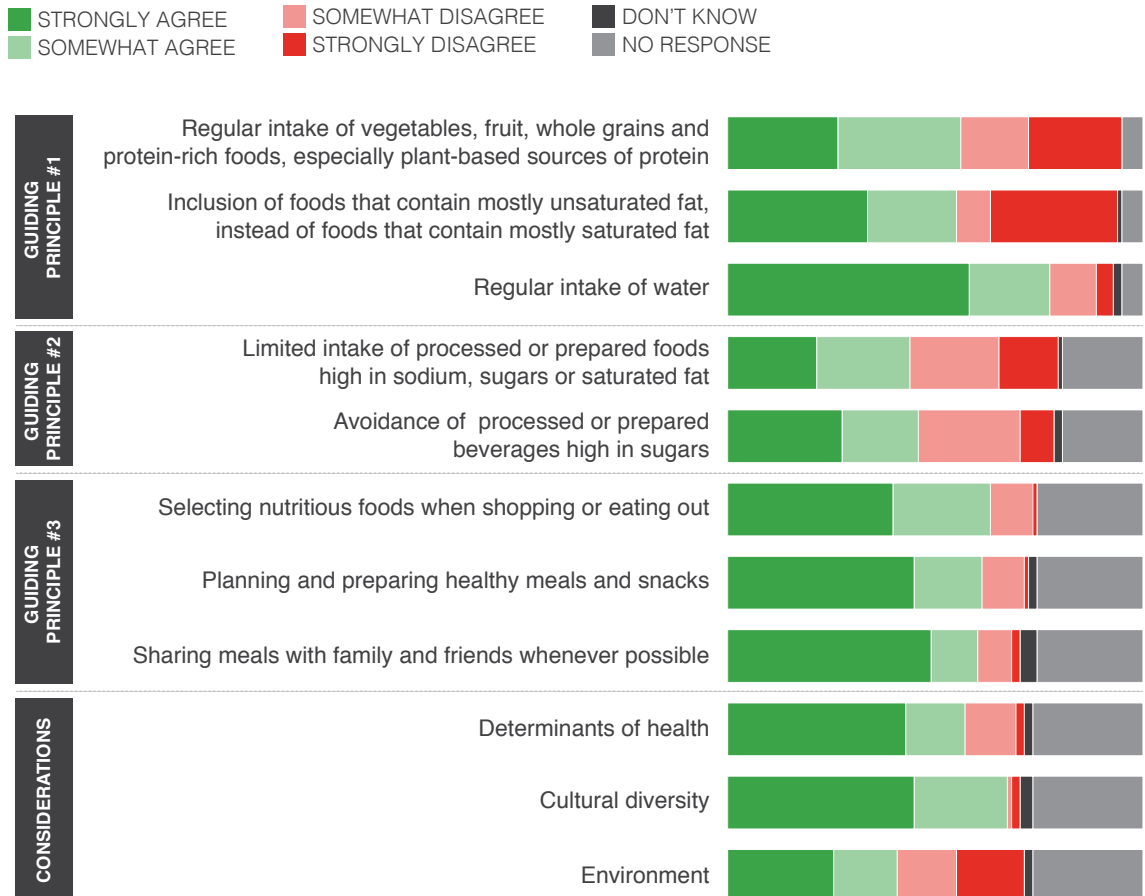


Figure 17: Do you agree or disagree with this recommendation?

Base: Food and Beverage Industry (n=98)

The food and beverage industry:

- disagreed about the shift away from animal-based proteins
- disagreed about the focus on reducing saturated fat consumption
- were not as concerned with simplifying the wording in these recommendations
- voiced concerns about food taste and general food preferences not being taken into account
- felt the recommendations should be based on food as a whole rather than their specific nutrients

EVALUATING THE CONSULTATION

IMPRESSIONS OF THE CANADA'S FOOD GUIDE PHASE 2 CONSULTATION

■ YES ■ NO ■ DON'T KNOW

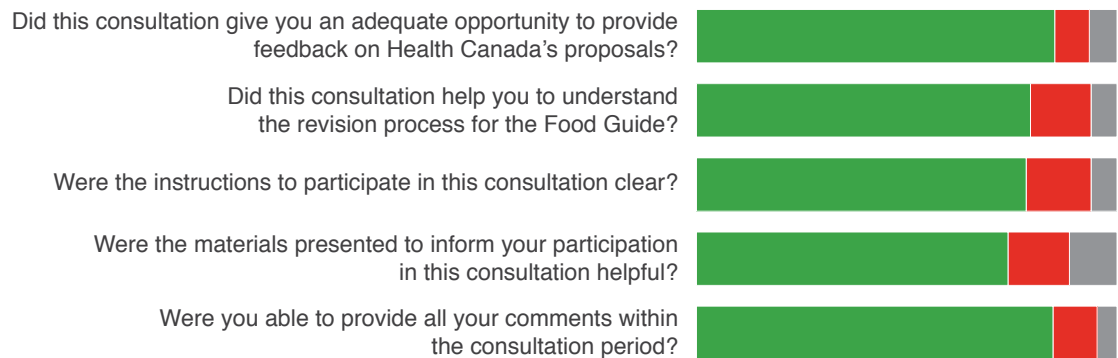


Figure 18: EVAL01. Please answer each of the following:
Base: All Responding Contributors (n=486)

Consultation participants were given the opportunity to evaluate the consultation process. Most were positive about the efforts being made by Health Canada to be consultative and allow for feedback from across different viewpoints, backgrounds and stakeholder groups.

Many of those who responded to the evaluation questions reiterated their positions relating to the Guiding Principles and Recommendations. Some were concerned about the perceived elimination of dairy from the Food Guide while others were disappointed they were not invited to review the public-facing materials.

For a few contributors the length of the consultation period and time between the two phases made it difficult for them to reflect on the overall process. However, most were happy with the opportunities, information provided and ability to share comments offered by the consultation.

CLOSING REMARKS

Overall, the Guiding Principles, Recommendations and Considerations were well received and resonated with a highly-engaged and informed audience, not only among professionals and organizations but also among the public. Health Canada will be developing materials to support this guidance, and add the clarity and detail that was sought by many contributors.

Many contributors noted their appreciation of the evidence-based approach to developing these guidelines and were excited to see the results of these revisions to Canada's Food Guide. They noted the importance of providing guidance that:

- is inclusive of a diverse range of groups within Canada
- provides examples of foods included within these Recommendations
- offers tools for consumers to help them apply these Recommendations to their day-to-day eating choices

APPENDIX

Methodology

The consultation was comprised of a discussion document with consultation questions embedded. This document was available through an online platform. A registration element acted as a contributor identifier and reduced the risk of multiple or duplicate submissions. Phase 1 of the consultation was conducted between October 24th, 2016 to December 8th, 2016. Phase 2 was available to be completed by the general public and interested stakeholders between June 10th, 2017 and August 14th, 2017.

The consultation was:

- qualitative in nature; and
- made up of a series of close-ended questions followed by open-ended questions related to the Guiding Principles and Recommendations.

A print version of the discussion document was made available for those who requested an alternative format for responding due to internet access limitations.

Ipsos utilized in-house personnel to code all open-ended feedback from the forum and consultation questionnaire. A code frame, or series of themes, were created, and checked internally among the Ipsos project team, as well as confirmed with the team at Health Canada. The codes were then populated, as counts, based on the number of times a response was categorized under a particular code. In some cases, contributors' comments were applied to multiple codes.

The Ipsos project team separately analyzed the comments as the primary point for analysis of the major themes within this report.

In addition to the coding and manual review of a random selection of verbatim comments collected within the questionnaire, text analytics software was used to provide a more in-depth view of all the verbatim feedback. In tandem with a manual review to theme and code each mention, text analytics used computer processing techniques to identify and quantify the main themes and sentiment in text data. The resulting models generated using the software have also been included and explored within this report.

Promotion of the consultation

Health Canada made a concerted effort to ensure interested stakeholders were aware of the nature of the consultation and the opportunity to participate. Announcements regarding the consultation were featured on the Health Canada website and made through interviews in traditional media. In addition, a comprehensive social media strategy was used to promote participation in the consultation.

An invitation to participate was sent through the Consultation and Stakeholder Information Management System (CSIMS) and key national stakeholder organizations, as well as to previous registrants for Phase 1 of the Canada's Food Guide consultation. The Restricting Marketing to Children consultation, running concurrently to the Canada's Food Guide consultation Phase 2, also served as an additional promotion for the initiative.

Summary of Guiding Principles and Recommendations

Based on the available evidence, Health Canada has translated the science on food and health into evidence-informed Guiding Principles and Recommendations for application in the Canadian context.

The Guiding Principles and Recommendations provide a foundation for healthy eating that promotes health and reduces the risk of nutrition-related chronic disease. Health Canada recognizes that Canadians may occasionally consume foods and beverages outside these recommendations; less healthy choices high in sodium, sugars or saturated fat will be consumed at times. What matters most is what people eat on a regular basis.

Individuals with special dietary requirements may need additional guidance from a health care professional.

Proposed Guiding Principles and Recommendations and Considerations

Guiding Principle 1: A variety of nutritious foods and beverages are the foundation for healthy eating

Health Canada recommends:

- regular intake of vegetables, fruit, whole grains and protein-rich foods, especially plant-based sources of protein
- inclusion of foods that contain mostly unsaturated fat, instead of foods that contain mostly saturated fat
- regular intake of water

Guiding Principle 2: Processed or prepared foods and beverages high in sodium, sugars or saturated fat undermine healthy eating.

Health Canada recommends:

- limited intake of processed or prepared foods high in sodium, sugars or saturated fat
- avoiding processed or prepared beverages high in sugars

Guiding Principle 3: Knowledge and skills are needed to navigate the complex food environment and support healthy eating.

Health Canada recommends:

- selecting nutritious foods when shopping or eating out
- planning and preparing healthy meals and snacks
- sharing meals with family and friends whenever possible

Considerations

- determinants of health
- cultural diversity
- environment

Guiding Principles and Recommendations

Element A: Guiding Principle 1

Based on the available evidence, Health Canada is proposing the following Guiding Principle and Recommendations to focus on the regular intake of nutritious foods as the foundation for healthy eating.

Guiding Principle 1: A variety of nutritious foods and beverages are the foundation for healthy eating

Health Canada recommends:

- regular intake of vegetables, fruit, whole grains, and protein-rich foods^[1] – especially plant-based sources of protein
- inclusion of foods that contain mostly unsaturated fat, instead of foods that contain mostly of saturated fat
- regular intake of water

What this means for Canadians

The majority of Canadians don't eat enough vegetables, fruits and whole grains. Many drink beverages high in sugars. This means that most Canadians will need to make different choices to meet these recommendations.

What is needed is a shift towards a high proportion of plant-based foods, without necessarily excluding animal foods altogether. Animal foods such as eggs, fish and other seafood, poultry, lean red meats such as game meats, lower fat milk and yogurt, as well as cheeses lower in sodium and fat, are nutritious 'everyday' foods. Some of these protein-rich foods can be high in sodium (for example, salted nuts), sugars (for example, sweetened yogurt) or saturated fat (for example, some meats and many cheeses) and should be limited. They can be identified using the % Daily Value (DV) on the Nutrition Facts table: 5% or less of the %DV is "a little" and 15% or more of the %DV is 'a lot' of sodium, sugars or saturated fat.

A shift towards more plant-based foods can help Canadians:

- eat more fibre-rich foods
- eat less red meat, such as:

[1] Protein-rich foods include: legumes (such as beans), nuts and seeds, soy products (including fortified soy beverage), eggs, fish and other seafood, poultry, lean red meats (including game meats such as moose, deer and caribou), lower fat milk and yogurt, cheeses lower in sodium and fat. Nutritious foods that contain fat such as homogenized (3.25% M.F.) milk should not be restricted for young children.

- beef
- pork
- lamb
- goat
- replace foods that contain mostly saturated fat, such as cream, high fat cheeses and butter with foods that contain mostly unsaturated fat, such as nuts, seeds and avocado

To help meet these recommendations, Canadians can choose nutritious foods and beverages, including:

- foods and beverages that require little or no preparation, such as fresh, frozen and canned vegetables and fruit, canned legumes or fish, tofu, plain milk or fortified plant-based beverages;
- foods and beverages that are pre-packaged for convenience (such as pre-washed salad greens or pre-cut fruit) or to increase shelf-life (such as powdered milk);
- foods like nuts, seeds, avocado, fatty fish and vegetable oils instead of foods like high fat cheeses and cream; and
- foods obtained through: gardening, hunting, trapping, fishing and harvesting.

Plain water is the beverage of choice to help reduce sugars intake and reduce the frequency at which teeth are exposed to sugars.

Element B: Guiding Principle 2

Based on the available evidence, Health Canada is proposing the following Guiding Principle and Recommendations to emphasize that processed or prepared foods and beverages high in sodium, sugars or saturated fats have the potential to impact health when consumed on a regular basis. Health Canada recognizes that these less healthy choices will be consumed at times. What matters most is what people eat on a regular basis.

Health Canada acknowledges that some forms of processing, such as pasteurization, have public health benefits. However, foods processed or prepared with high amounts of sodium, sugars, or saturated fat can have a negative impact on health.

Guiding Principle 2: Processed or prepared foods and beverages high in sodium, sugars, or saturated fat undermine healthy eating

Health Canada recommends:

- limited intake of processed or prepared foods high in sodium, sugars, or saturated fat
- avoiding processed or prepared beverages high in sugars^[2]

What this means for Canadians

The consumption of processed or prepared foods is on the rise in Canada. At least half of the sugars intake of Canadians come from processed or prepared foods and beverages, such as: soft drinks, sweet baked goods, fruit juice, confectionary, breakfast cereals, and sweetened dairy products. More than three quarters of the sodium Canadians consume comes from processed foods or foods prepared at restaurants. As well, the saturated fat intake of about half of Canadians is too high.

Soft drinks and fruit drinks are main sources of sugars in the diets of Canadians. Avoiding these beverages and other beverages high in sugars can help Canadians cut down on sugars intake. This protects oral health, and may reduce the risk of obesity and type 2 diabetes.

Foods and beverages high in sodium, sugars or saturated fat can be identified using the % Daily Value (DV) on the Nutrition Facts table: 15% or more of the %DV is “a lot” of sodium, sugars or saturated fat.

Element C: Guiding Principle 3

Based on the available evidence, Health Canada is proposing the following Guiding principle and Recommendations to highlight that knowledge and skills are a practical way to support healthy eating, as is limiting reliance on processed and prepared foods high in sodium, sugars or saturated fat.

Guiding Principle 3: Knowledge and skills are needed to navigate the complex food environment and support healthy eating

Health Canada recommends:

- selecting nutritious foods when shopping or eating out
- planning and preparing healthy meals and snacks

[2] Processed or prepared beverages that can be high in sugars include: soft drinks, fruit-flavoured drinks, 100% fruit juice, flavoured waters with added sugars, sport drinks, energy drinks, and other sweetened hot or cold beverages, such as flavoured milks and flavoured plant-based beverages.

- sharing meals with family and friends whenever possible

What this means for Canadians

Fewer Canadians are preparing meals from scratch, which involves transforming basic ingredients into complete, culturally appropriate meals. Canadians are also increasingly reliant on convenience foods. The increased use of convenience foods is not always due to limited skills, but also to time constraints, or social and economic considerations.

Planning and preparing healthy meals and snacks at home, and selecting nutritious foods at the grocery store or when eating out, are all skills that can help support healthy eating. Preparing and sharing food brings enjoyment to eating when done in the company of family and friends. Having meals together can help reinforce positive eating habits and help children develop healthy attitudes towards food. It can also be a way for people to take part in food cultures they did not grow up with.

As skills are learned and used, the process to select, plan and prepare meals can become less time-consuming and more routine. Building a foundation of knowledge and skills can contribute to improved food choices at any age and can help support life-long healthy eating habits.

Understanding where food comes from and how it is prepared can support more mindful eating practices. Mindful eating practices include:

- eating slowly with enjoyment
- avoiding distractions while eating
- taking time to eat and savour every bite
- paying attention to feelings of hunger and fullness

Element D: Considerations

Healthy eating recommendations can make an important contribution to nutritional health. To do so, they must be relevant in the Canadian context, no matter where people live, work, learn or play.

Determinants of health

Food choices are not simply a matter of personal choice. There are many inter-related factors that influence our ability to make healthy food choices, including:

- culture

- the social and physical environment
- access to and availability of nutritious foods^[3]

Health Canada's proposed healthy eating recommendations are based on the best available evidence, while considering that healthy choices can be affordable, found in different regions of Canada, and enjoyed by different cultures. For example, a range of nutritious foods form the foundation of healthy eating: frozen, packaged and canned products are convenient and nutritious options, especially when fresh food is out of season, more costly or unavailable.

Health Canada's proposed healthy eating recommendations aim to improve health of the whole population, while considering the needs of sub-groups to avoid increasing unfair and avoidable differences in health status.^[4]

Cultural diversity

Combining nutritious foods in ways that reflect cultural preferences and food traditions can support healthy eating. The cultural make-up in Canada is rich and diverse with over 200 different ethnic origins identified on the Canadian Census.^[5] Part of this diversity is represented in the traditions, culture and lifestyles of Indigenous populations. Traditional foods and the harvesting of traditional foods are intrinsically linked to identity and culture, and contribute to overall health.^[6]

Environment

The way our food is produced, processed, distributed, and consumed – including the losses and waste of food – can have environmental implications, such as:

- wildlife loss
- soil degradation
- greenhouse gas emissions (GHG)
- decreases in water quality and availability^[7]

[3] Special Supplement of the Canadian Journal of Public Health 2005. Understanding the forces that influence our eating habits: What we know and need to know.

[4] Public Health Agency of Canada. 2011. Reducing health inequalities: A challenge for four our times.

[5] Statistics Canada. Immigration and ethnocultural diversity in Canada.

[6] Chan L, Receveur O, Sharp D, et al. First Nations Food, Nutrition and Environment Study (FNFNES): Results from British Columbia (2008/2009). Prince George: University of Northern British Columbia, 2011; Chan L, Receveur O, Sharp D, et al. First Nations Food, Nutrition and Environment Study (FNFNES): Results from Manitoba (2010). Prince George: University of Northern British Columbia, 2012; Chan L, Receveur O, Batal M, et al. First Nations Food, Nutrition and Environment Study (FNFNES): Results from Ontario (2011/2012). Ottawa: University of Ottawa, 2014; Chan L, Receveur O, Batal M, et al. First Nations Food, Nutrition and Environment Study (FNFNES): Results from Alberta 2013. Ottawa: University of Ottawa, 2016.

[7] Agriculture and Agri-food Canada. 2017. Draft Food Policy for Canada. Available: [www.canada.ca/food-policy\(External\(External link\) link\)](http://www.canada.ca/food-policy(External(External link) link)).

In 2014, the value of food waste and loss in Canada was estimated at \$31 billion.^[8] The primary focus of Health Canada's proposed healthy eating recommendations is to support health. However, there are also potential environmental benefits of shifting towards healthy eating. In general, diets higher in plant-based foods and lower in animal-based foods are associated with a lesser environmental impact, when compared to current diets high in sodium, sugars and saturated fat.^[9] The application of skills, such as planning meals and food purchases can also help decrease household food waste.

Evidence Base

Health Canada carried out its first Evidence Review Cycle for Dietary Guidance between 2013 and 2015, which is referred to as the '2015 Evidence Review'. This review looked at evidence from 2006 to 2015. Data gathering methods and findings are presented in detail elsewhere.^[10]

Sources of evidence included:

- U.S. Institute of Medicine Dietary Reference Intakes reports (such as updated Dietary Reference Intakes for calcium and vitamin D)
- High-quality reports on food and health from federal agencies (such as U.S. Dietary Guidelines Advisory Committee reports) and leading scientific organizations (such as the World Cancer Research Fund)
- Health Canada health claims assessments
- Recent systematic reviews of the research on selected food topics
- Data on the dietary intakes of Canadians (Canadian Community Health Survey 2004, nutrition focus)
- Data on the nutritional status of Canadians (Canadian Health Measures Surveys)

[8] Value Chain Management International. The cost of Canada's annual food waste. 2014

[9] Dietary Guidelines Advisory Committee 2015: Scientific report of the DGAC: Advisory report to the Secretary of Health and Human Services and the Secretary of Agriculture. Aleksandrowicz, L., Green, R., Joy, E. J.M., Smith, P., Haines, A. (2016). The Impacts of Dietary Change on Greenhouse Gas Emissions, Land Use, Water Use and Health: A Systematic Review. PLOS ONE. 2016;11(11): e0165797. Nelson, M. E., Hamm, M. W., Hu, F. B., Abrams, S. A., Griffin, T. S. (2016). Alignment of Healthy Dietary Patterns and Environmental Sustainability: A Systematic Review. Advances in Nutrition: An International Review Journal, 7(6), 1005-1025. doi:10.3945/an.116.012567. Payne, C. L., Scarborough, P., Cobiac, L. (2016). Do low-carbon-emission diets lead to higher nutritional quality and positive health outcomes? A systematic review of the literature. Public Health Nutrition, 19(14), 2654-2661. doi:10.1017/s1368980016000495

[10] Colapinto CK, Ellis A, Faloon-Drew K, et al. Developing an Evidence Review Cycle model for Canadian dietary guidance. Journal of Nutrition Education and Behavior. 2016;48(1):77-83. Health Canada. Evidence review of dietary guidance: Technical report. Ottawa, 2016.

- Reports on the health status of Canadians
- Results of the Assessment of the Use of Eating Well with Canada's Food Guide. This included results of the 2012 Canadian Community Health Survey Rapid Response module, which collected responses from 9700 Canadians on their awareness and use of the Food Guide.

Building on the 2015 Evidence Review, Health Canada continues to monitor the most recent evidence on food and health. Scientific reports that included extensive systematic reviews of the literature on food related topics were considered. High-quality, peer reviewed systematic reviews were also included. Strict inclusion criteria for selecting reports were set. For example, reports had to:

- provide the grading of evidence
- be published by a leading scientific organization or governmental agency

Exclusion criteria were also defined. For example, industry commissioned reports were excluded.

Evidence supporting Guiding Principle 1

Dietary patterns

- Association between increased intakes according to the Dietary Approaches to Stop Hypertension (DASH) pattern and decreased blood pressure or LDL cholesterol^[11]
- Association between increased intakes according to Mediterranean-style, Portfolio or DASH patterns and decreased LDL cholesterol or cardiovascular disease risk^[12]

Foods containing dietary fibre

- Association between increased intakes of foods containing dietary fibre and decreased risk of colorectal cancer^[13]

[11] American College of Cardiology/American Heart Association 2013: Guideline on lifestyle management to reduce cardiovascular risk: a report of the ACC/AHA task force on practice guidelines; Dietary Guidelines Advisory Committee 2015: Scientific report of the DGAC: Advisory report to the Secretary of Health and Human Services and the Secretary of Agriculture.

[12] American College of Cardiology/American Heart Association 2013: Guideline on lifestyle management to reduce cardiovascular risk: a report of the ACC/AHA task force on practice guidelines; Canadian Cardiovascular Society 2016: Canadian Cardiovascular Society Guidelines for the Management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult.

[13] World Cancer Research Fund 2011: CUP report: colorectal cancer; Public Health England Scientific Advisory Committee on Nutrition 2015: Carbohydrates and Health Report.

Fruit and vegetables

- Association between increased intakes of fruit and vegetables and decreased cardiovascular disease risk^[14]

Nuts

- Association between a diet high in nuts and decreased LDL cholesterol^[15]

Soy protein

- Association between increased intakes of soy protein and decreased LDL cholesterol^[16]

Red meat (beef, pork, lamb and goat)

- Association between increased intakes of red meat (beef, pork, lamb and goat) and increased risk of colorectal cancer^[17]

Saturated fatty acid replacement

- Association between replacement of saturated fatty acids with unsaturated fatty acids and decreased LDL cholesterol or cardiovascular disease risk^[18]

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- [14] Health Canada 2015: Summary of Assessment of a Health Claim about Vegetables and Fruit and Heart Disease.
- [15] Canadian Cardiovascular Society 2016: Canadian Cardiovascular Society Guidelines for the Management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult.
- [16] Health Canada 2015: Summary of Assessment of a Health Claim about Soy Protein and Cholesterol Lowering; Canadian Cardiovascular Society 2016: Canadian Cardiovascular Society Guidelines for the Management of Dyslipidemia for the Prevention of Cardiovascular Disease in the Adult.
- [17] World Cancer Research Fund 2011: CUP report: colorectal cancer.
- [18] Health Canada 2012: Summary of Assessment of a Health Claim about the Replacement of Saturated Fat with Mono- and Polyunsaturated Fat and Blood Cholesterol; Dietary Guidelines Advisory Committee 2015: Scientific report of the DGAC: Advisory report to the Secretary of Health and Human Services and the Secretary of Agriculture; Dietary Guidelines Advisory Committee 2010: Report of the DGAC on the Dietary Guidelines for Americans; World Health Organization. 2016: Effect of trans-fatty acid intake on blood lipids and lipoproteins: a systematic review and meta-regression analysis; World Health Organization 2016: Effects of saturated fatty acids on serum lipids and lipoproteins: a systematic review and regression analysis.

Evidence supporting Guiding Principle 2

Sodium

- Association between increased intakes of sodium and increased blood pressure^[19]

Sugars

- Association between increased intakes of added sugar (from food and/or sugar-sweetened beverages) and increased risk of obesity or type 2 diabetes^[20]
- Association between increased intakes of sugar-sweetened beverages and increased risk of obesity among children^[21]
- Association between increased intakes of sugar-containing beverages and increased risk of dental caries in children^[22]

Saturated fatty acid replacement

- Association between replacement of saturated fatty acids with unsaturated fatty acids and decreased LDL blood cholesterol and cardiovascular disease risk^[23]

Processed meat

- Association between increased intakes of processed meat (meats processed by smoking, curing or salting, or addition of chemical preservatives) and increased risk of colorectal cancer^[24]

[19] World Health Organization 2012: Guideline: sodium intake for adults and children; American College of Cardiology/American Heart Association 2013: Guideline on lifestyle management to reduce cardiovascular risk: a report of the ACC/AHA task force on practice guidelines; Dietary Guidelines Advisory Committee 2010: Report of the DGAC on the Dietary Guidelines for Americans; National Health and Medical Research Council 2011: A review of the evidence to address targeted questions to inform the revisions of the Australian Dietary Guidelines.

[20] Dietary Guidelines Advisory Committee 2015: Scientific report of the DGAC: Advisory report to the Secretary of Health and Human Services and the Secretary of Agriculture.

[21] Dietary Guidelines Advisory Committee 2010: Report of the DGAC on the Dietary Guidelines for Americans.

[22] Scientific Advisory Committee on Nutrition 2015: Carbohydrates and Health Report.

[23] Health Canada 2012: Summary of Assessment of a Health Claim about the Replacement of Saturated Fat with Mono- and Polyunsaturated Fat and Blood Cholesterol; Dietary Guidelines Advisory Committee 2015: Scientific report of the DGAC: Advisory report to the Secretary of Health and Human Services and the Secretary of Agriculture; Dietary Guidelines Advisory Committee 2010: Report of the DGAC on the Dietary Guidelines for Americans; World Health Organization. 2016: Effect of trans-fatty acid intake on blood lipids and lipoproteins: a systematic review and meta-regression analysis; World Health Organization 2016: Effects of saturated fatty acids on serum lipids and lipoproteins: a systematic review and regression analysis.

[24] World Cancer Research Fund 2011: CUP report: colorectal cancer.

Evidence supporting Guiding Principle 3

Health Canada recognizes that knowledge and skills are needed to apply Guiding Principles 1 and 2 and subsequently improve diet quality and health outcomes. The evidence for Guiding principle 3 is primarily drawn from Health Canada's analysis of the evidence and describes the Canadian context and the settings in which skills can be learned at any stage of life.^[25]

Home food preparation and health

- The research on the relationship between home food preparation and health is limited; however, available evidence suggests that home food preparation may be associated with diets that are consistent with healthy eating recommendations.^[26]

Canadian context

- There has been a shift from cooking from scratch towards use of pre-prepared, packaged and convenience foods, which require fewer or different skills.^[27]
- Canadian households have significantly increased the proportion of the food budget that is spent on ready-to-eat or ready-to-heat convenience foods.^[28]
- On average, Canadian households spend about 30 percent of their food budget on meals and snacks purchased from restaurants, cafeterias, vending machines and other 'away from home' sources.^[29] Meals eaten away from home can increase the amount of calories, sodium, sugars and saturated fat in the diet.^[30]

[25] Government of Canada. A Look at Food Skills in Canada. Ottawa, 2015; Government of Canada. Improving Cooking and Food Preparation Skills: A Profile of Promising Practices in Canada and Abroad. Ottawa, 2010.

[26] Mills S, White M, Brown H, et al. 2017. Health and social determinants and outcomes of home cooking: A systematic review of observational studies. *Appetite*. 111:116-134.

[27] Government of Canada. Improving cooking and preparation skills. A synthesis of the evidence to inform program and policy development. Ottawa, 2010.

[28] Moubarac JC, Batal M, Martins AP, et al. Processed and ultra-processed food products : Consumption trends in Canada from 1938 to 2011. *Can J Diet Pract Res*. 2014;75(1):15-21.

[29] Statistics Canada. Survey of household spending, detailed food expenditures, Canada, regions and provinces. Table 203-0028. Available at <http://www5.statcan.gc.ca/cansim/a05?lang=eng&id=2030028> (accessed 2017 February 12).

[30] Nguyen BT, Powell LM. The impact of restaurant consumption among US adults: Effects on energy and nutrient intakes. *Public Health Nutr*. 2014;17(11):2445-2452.

Consultation Questions

Please choose what **best** describes you. Are you giving us your feedback:

- On behalf of an organization?
- As someone who cares about healthy eating recommendations for you, your family, or friends?
- As a professional who uses healthy eating recommendations in your work?
- I prefer not to disclose.

Province/Territory

Prefer not to disclose

What is your age?

- Under 18
- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65+
- Prefer not to disclose

Check any of the following statements that apply to you:

- I am the parent or guardian of a child under 16 years of age.
- I am an Indigenous person, that is, First Nations, Métis or Inuk (Inuit).
- I am a member of a visible minority, by virtue of race or colour.
- I am a recent immigrant to Canada (past 5 years).
- I prefer not to disclose.

My main interest in healthy eating recommendations is:

- Healthy lifestyle for myself
- Healthy lifestyle for my family
- Other
- Prefer not to disclose

Select the sector in which you work:

- Government
- Food and beverage industry (for example, agriculture, food producers, food retailers, food distributors, hospitality)
- Schools and daycares
- Hospitals and other health care facilities
- Research in an academic setting
- Private practice or consulting
- Health and nutrition organizations
- Sports, athletics, and fitness
- Other
- Prefer not to disclose

Select the sector in which your organization works:

- Government
- Food and beverage industry (for example, agriculture, food producers, food retailers, food distributors, hospitality)
- Schools and daycares
- Hospitals and other health care facilities
- Research in an academic setting
- Private practice or consulting
- Health and nutrition organizations
- Sports, athletics, and fitness
- Other
- Prefer not to disclose

How often do you work with one or more of the following client groups?

- Older adults
 - Children or youth
 - Indigenous peoples
 - Low-income earners
 - Newcomers to Canada
 - People with a low literacy level
-
- Always
 - Often
 - Sometimes
 - Rarely

- Never
- Prefer not to disclose

How often does your organization work with one or more of the following client groups?

- Older adults
 - Children or youth
 - Indigenous peoples
 - Low-income earners
 - Newcomers to Canada
 - People with a low literacy level
-
- Always
 - Often
 - Sometimes
 - Rarely
 - Never
 - Prefer not to disclose

What is your main interest in healthy eating recommendations?

- For program design
- To develop policies and guidelines
- For tool and resource development
- For food product development or marketing
- For in-service training and training trainers
- For individual nutritional counselling and assessment
- For group education (for example, in schools or the community)
- For assessment of eating habits in a research or monitoring setting
- For general health promotion
- Other
- Prefer not to disclose

What is your organization's main interest in healthy eating recommendations?

- For program design
- To develop policies and guidelines
- For tool and resource development
- For food product development or marketing

- For in-service training and training trainers
- For individual nutritional counselling and assessment
- For group education (for example, in schools or the community)
- For assessment of eating habits in a research or monitoring setting
- For general health promotion
- Other
- Prefer not to disclose

Guiding Principle 1: A variety of nutritious foods and beverages are the foundation for healthy eating

Do you agree with the following statements about this Guiding Principle?

- Yes
 - No
 - Don't know
-
- It is relevant to “my work and/or my organization’s work.” **OR** “me and my family.”
 - It is clear
 - It provides enough information.

Recommendation #1 - Regular intake of vegetables, fruit, whole grains and protein-rich foods, especially plant-based sources of protein

Do you agree or disagree with this recommendation?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

What do you **like** about this recommendation?

What do you **dislike** about this recommendation?

Recommendation #2 - Inclusion of foods that contain mostly unsaturated fat, instead of foods that contain mostly saturated fat

Do you agree or disagree with this recommendation?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

What do you **like** about this recommendation?

What do you **dislike** about this recommendation?

Recommendation #3 - Regular intake of water

Do you agree or disagree with this recommendation?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

What do you **like** about this recommendation?

What do you **dislike** about this recommendation?

Is there anything else you would like to say about Guiding Principle #1 and the recommendations?

Based on your experience working with older adults, children and youth, Indigenous populations, low-income people, newcomers, or people with low literacy, is there any further feedback that you would like to give us?

Guiding Principle 2: Processed or prepared foods and beverages high in sodium, sugars or saturated fat undermine healthy eating

Do you agree with the following statements about this Guiding Principle?

- Yes
- No
- Don't know
- It is relevant to "my work and/or my organization's work." **OR** "me and my family."
- It is clear
- It provides enough information.

Recommendation #1 - Limited intake of processed or prepared foods high in sodium, sugars or saturated fat

Do you agree or disagree with this recommendation?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

What do you **like** about this recommendation?

What do you **dislike** about this recommendation?

Recommendation #2 - Avoiding processed or prepared beverages high in sugars

Do you agree or disagree with this recommendation?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

What do you **like** about this recommendation?

What do you **dislike** about this recommendation?

Is there anything else you would like to say about Guiding Principle #2 and the recommendations?

Based on your experience working with older adults, children and youth, Indigenous populations, low-income people, newcomers, or people with low literacy, is there any further feedback that you would like to give us?

Guiding Principle 3: Knowledge and skills are needed to navigate the complex food environment and support healthy eating

Do you agree with the following statements about this Guiding Principle?

- Yes
- No
- Don't know
- It is relevant to “my work and/or my organization’s work.” **OR** “me and my family.”
- It is clear
- It provides enough information.

Recommendation #1: Selecting nutritious foods when shopping or eating out

Do you agree or disagree with this recommendation?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

What do you **like** about this recommendation?

What do you **dislike** about this recommendation?

Recommendation #2: Planning and preparing healthy meals and snacks

Do you agree or disagree with this recommendation?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

What do you **like** about this recommendation?

What do you **dislike** about this recommendation?

Recommendation #3: Sharing meals with family and friends whenever possible

Do you agree or disagree with this recommendation?

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

What do you **like** about this recommendation?

What do you **dislike** about this recommendation?

Is there anything else you would like to say about Guiding Principle #3 and the

recommendations?

Based on your experience working with older adults, children and youth, Indigenous populations, low-income people, newcomers, or people with low literacy, is there any further feedback that you would like to give us?

Considerations

Do you agree or disagree with these considerations?

- determinants of health
- cultural diversity
- environment

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

- Determinants of health
- Cultural diversity
- Environment

What do you **like** about these considerations?

What do you **dislike** about these considerations?

Project Evaluation

Please answer each of the following:

- Did this consultation give you an adequate opportunity to provide feedback on Health Canada's proposals?
- Did this consultation help you to understand the revision process for the Food Guide?
- Were the instructions to participate in this consultation clear?
- Were the materials presented to inform your participation in this consultation

helpful?

- Were you able to provide all your comments within the consultation period?

Response items:

- Yes
- No
- Don't know

How did you hear about this consultation?

- Word of mouth
- On social media from Health Canada or the Public Health Agency of Canada
- Nutrition blog or website
- News media
- Update from first phase of the consultation
- Email from Health Canada's stakeholder registry (Consultation and Stakeholder Information Management System – CSIMS)
- Other

Please specify:

Did you take part in the first phase of the consultation in the fall of 2016?

- Yes
- No
- Don't know

Was the feedback you shared in Phase 1 reflected in the proposed revisions presented as a part of this consultation?

- Yes
- No
- Don't know

What would you have liked to see in the proposed revisions to the healthy eating recommendations?

Please share any other comments you have about the consultation process for the Canada's Food Guide revision.

