

ADVICE TO MINISTER

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| <p>CONFIDENTIAL ISSUES NOTE</p> <p>Ministry: Health Date: January 10, 2014 Minister Responsible: Terry Lake</p> | <p>Taxing sugary drinks</p> |
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ADVICE AND RECOMMENDED RESPONSE:

- s.13
- Our approach has been to work collaboratively with the food industry to provide education and increase awareness of consumers so that they can make informed decisions about the food they eat.
- Through our Healthy Families BC and Informed Dining programs, we are providing a range of tools and supports to families to help them make the healthy choice the easy choice when dining out or grocery shopping.
- The supports include Healthy Families BC's sugary drink sense, an online tool that allows families to see how many cubes of sugar are in their sodas, fruit juice and other popular beverages.

Additional programs

- Healthy Schools BC, a key initiative of Healthy Families BC, focuses on creating healthier schools through strengthened health-education partnerships.
- Programs under Healthy Schools BC encourage physical activity, healthy eating, healthy relationships and healthy practices.
- The BC School Fruit and Vegetable Nutritional Program provides children in schools with a variety of fruits and vegetables to increase students' knowledge and preference of fruits and vegetables grown in B.C.
- As well, the 2013 edition of the Guidelines for Food and Beverage Sales in B.C. Schools was released on December 16, 2013.
- The guidelines are a mandated policy for all B.C. public schools that define the minimum nutrition standard that schools are required to apply to all food and beverages sold to students. Schools are applying these new guidelines immediately, with full implementation expected for fall 2014.
- Sugary drinks (pop, sports drinks, energy drinks, lemonades, iced teas, fruit cocktails, milk shakes, specialty coffee drinks, flavoured milks and soy beverages) fall within the "Do Not Sell" guidelines category and therefore are not allowed to be sold anywhere within B.C. schools or B.C. provincial buildings.

BACKGROUND REGARDING THE ISSUE:

- Dr. Tom Warshawski, chair of the Childhood Obesity Foundation, is planning op-eds for smaller community newspapers on the issue of taxation on all sugary drinks early in the New Year.

- He will be advocating that the revenue generated from the taxation go into public health programs to prevent and treat obesity.
- Dr. Warshawski has called for taxes on sugary drinks in the past.
- BC has taken an education/awareness approach to sugary drink reduction, as part of the Healthy Families BC prevention strategy.
- Healthy Families BC focuses on improving the health and wellness of British Columbians through programs which aim to address physical inactivity, unhealthy eating and obesity.
- We are also encouraging British Columbians to make healthy eating choices with our Informed Dining program and sugary drink sense tool:
<http://www.healthyfamiliesbc.ca/home/articles/sugary-drinks-how-much-sugar-are-you-drinking>.
- Where we have made a legislative stand is on the issue of industrially produced trans fat in foods, which increases your risk of heart disease. B.C. was the first province to regulate the use of trans fats in food service establishments.
- We will continue to work with the food industry and consumers to ensure British Columbian families can make the right choices to live healthier lives.

Communications Contact: Sarah Lindstein
 Program Area Contact: Meghan Day/Lisa Forster-Coull
 File Created: January 9, 2014
 File Updated:
 File Location: G:\PABGroups\Medstrat 2014\Operations\Issues
 Notes\Prevention\Healthy Living

| Minister's Office | Program Area | Deputy | Media Manager |
|-------------------|--------------|--------------|---------------|
| | Matt Herman | Arlene Paton | Ryan Jabs |

CKNW, 24-Oct-2012 14:15

Warshawski: Tax sugary drinks

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Vancouver Sun, Page A11, 31-Aug-2012

Sugary drinks fuel obesity epidemic

By Tom Warshawski

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ADVICE TO MINISTER

drink that contains 10 teaspoons of sugar. It's even worse to use this liquid candy to wash down the sweet dessert treat also tucked in the bag.

While parents are aware that sugar is "bad" for their children, makers of sugar-sweetened beverages spend hundreds of millions in marketing dollars every year to make sure their feel-good slogans override any unease consumers may have.

Let's take a minute and look at what happens in the body when someone consumes 10 teaspoons of sugar in liquid format, cut with just enough phosphoric acid to keep it from tasting overly sweet. Within 10 minutes of consuming a sugar-sweetened beverage, the body mobilizes to deal with the assault. The pancreas pumps out insulin to break down the onslaught of sugar. The insulin kick-starts the liver which then frantically starts turning sugar into fat. These fats are the same ones that are linked with the development of heart disease.

Once the pancreas and liver have got the sugar mopped up, a "sugar crash" often follows. The body, which has been running on overdrive, has removed so much sugar from the body so quickly that the drinker is left with low blood sugar. As a result they may feel left feeling exhausted, irritable, light-headed and hungry. Not exactly the best way to start the afternoon class!

As dramatic as the immediate impact of consuming a sugar-sweetened beverage is, the effect of long-term consumption is worse - and severely underestimated. Even in individuals of normal weight, sugary drinks have been linked with the development of high blood pressure and type 2 diabetes. The link with unhealthy weights is even stronger.

Children who drink sugary drinks on a daily basis have a 60 per cent higher risk of becoming overweight or obese than do non-consumers. Unfortunately, the majority of overweight children become overweight teen-agers who grow up to become over-weight adults.

If current trends continue, by 2040 up to 70 per cent of Canadian adults aged 40 will either be overweight or obese. The longer the time a person carries an unhealthy weight, the greater the risk of illness.

Being overweight significantly increases the likelihood of chronic diseases such as heart disease, stroke, arthritis, cancer and diabetes. The consequences are a diminished quality of life and an enormous burden for our provincial health care system that already pays some \$450 million for obesity-related illnesses annually.

But that won't happen to my child, most parents think. In fact, a recent article in The Vancouver Sun high-lighted a study revealing that only 16 per cent of B.C. parents consider their children as either overweight or obese when statistically closer to one in three youth have an unhealthy weight. In fact, the number of obese children in Canada has more than doubled in the last 25 years.

So what can be done? For starters, families need to re-evaluate their choices as they send their kids back to school. By making an informed choice about the drink in their child's lunch box, parents are making a powerful contribution to their child's long-term health.

Sugary drinks are inexpensive, tasty and heavily marketed to children and youth. They are not a good choice for hydration however. Water is the best beverage to quench thirst.

We educate our children and youth to prepare them for a productive and healthy future. But education begins at home and by making wise lunch bag selections, parents help their children learn about healthy beverage choices for the school day and for life.

Tom Warshawski is chair of the Childhood Obesity Foundation.

Taylor, Coral L HLTH:EX

From: Forster-Coull, Lisa HLTH:EX
Sent: Wednesday, May 21, 2014 10:28 AM
To: Paton, Arlene HLTH:EX
Cc: Cramb, Lorrie HLTH:EX
Subject: FW: Sugary Drinks

s.13 I am working at Keating today
but Lorrie is in the office and updating the backgrounders and responding to GCPE. Lisa

s.13

From: Forster-Coull, Lisa HLTH:EX
Sent: May-21-14 10:26 AM
To: Jabs, Ryan GCPE:EX; Rorison, Trish GCPE:EX; Cramb, Lorrie HLTH:EX; McKellar, Lisa HLTH:EX
Cc: Baker-French, Sophia HLTH:EX; Herman, Matt HLTH:EX
Subject: RE: Sugary Drinks

Ryan, no research has been done to answer your specific and excellent questions. There are some past studies that estimate that a 10% increase in the price of sugar-sweetened beverages would reduce the consumption by 8 to 11%.^{s.1}

s.13 Lorrie Cramb and staff are updating a
backgrounder on this.

But -

- 1) We do know that comprehensive approaches to chronic diseases prevention are effective and that economic levers (like taxes) are an important part of comprehensive approaches. It is difficult to tease out the effectiveness of individual parts.
- 2) Healthy Families BC is targeting sugary drink intake through policy (school food guidelines) and through awareness/education (sugary drink sense).^{s.13}
s.13
- 3) Sugary drinks have little to no nutritional value ^{s.13}
s.13
- 4) ^{s.13}

For these reasons, it would be important to review the pst rules as they apply to sugary drinks (and to all junk food for that matter). Lisa

From: Jabs, Ryan GCPE:EX
Sent: May-21-14 10:06 AM
To: Rorison, Trish GCPE:EX; Forster-Coull, Lisa HLTH:EX; Cramb, Lorrie HLTH:EX; McKellar, Lisa HLTH:EX
Cc: Baker-French, Sophia HLTH:EX
Subject: RE: Sugary Drinks

Lisa, has there been research done in Canada on whether the tax in other provinces has effectively reduced demand? Has there been any done in B.C. when the HST was in place, compared to before or current rates?

From: Rorison, Trish GCPE:EX
Sent: May-21-14 10:04 AM
To: Forster-Coull, Lisa HLTH:EX; Cramb, Lorrie HLTH:EX; McKellar, Lisa HLTH:EX
Cc: Baker-French, Sophia HLTH:EX; Jabs, Ryan GCPE:EX
Subject: RE: Sugary Drinks

According to this site there is no tax on pop or chips (see Food and Beverages section), only 5% GST.
<http://www.mlwaccounting.ca/resources/whatistaxable.pdf>

From: Forster-Coull, Lisa HLTH:EX
Sent: May-21-14 10:01 AM
To: Cramb, Lorrie HLTH:EX; Rorison, Trish GCPE:EX; McKellar, Lisa HLTH:EX
Cc: Baker-French, Sophia HLTH:EX
Subject: RE: Sugary Drinks

Hi all. Sophia can locate the latest scan. Last time I checked there was a provincial sales tax on sugary drinks in most jurisdictions in Canada. Those jurisdictions that have HST apply the HST to sugary drinks. Sugary drinks are subject to GST. No jurisdiction in Canada had an additional tax on sugary drinks. Lisa

From: Cramb, Lorrie HLTH:EX
Sent: May-21-14 9:53 AM
To: Rorison, Trish GCPE:EX; McKellar, Lisa HLTH:EX
Cc: Forster-Coull, Lisa HLTH:EX
Subject: RE: Sugary Drinks

Not to my knowledge...more common in the US

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Healthy Living Branch, Population and Public Health
BC Ministry of Health
1515 Blanshard St, Victoria, BC V8W 3C8
Phone: (250) 952-1124
Cell: (250) 507-0256

From: Rorison, Trish GCPE:EX
Sent: May-21-14 9:49 AM
To: Cramb, Lorrie HLTH:EX; McKellar, Lisa HLTH:EX
Subject: RE: Sugary Drinks

Thanks Lorrie – do you know if other jurisdictions in Canada tax sugary drinks?

From: Cramb, Lorrie HLTH:EX
Sent: May-21-14 9:17 AM
To: Rorison, Trish GCPE:EX; McKellar, Lisa HLTH:EX
Subject: RE: Sugary Drinks

No

Lorrie Cramb, MEd, RD

A/Provincial Nutritionist

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BC Ministry of Health

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From: Rorison, Trish GCPE:EX

Sent: May-21-14 8:44 AM

To: McKellar, Lisa HLTH:EX; Cramb, Lorrie HLTH:EX

Subject: Sugary Drinks

Hi There - Can you tell me if there are any provincial taxes on sugary drinks? I don't think there are any but wanted to find out if there are taxes or any dis-incentives like this.

Thanks,

Trish

Trish Rorison

Senior Public Affairs Officer

Government Communications and Public Engagement – Health

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Sugar/Sugary Drink Taxation

Bullets for estimates to support the Fact Sheet: HEALTH PROMOTION MEASURES TO REDUCE CHILDREN'S INTAKE OF SUGARY DRINKS

Dietary Sugar (General)

- s.13
- In March 2014, the WHO released draft guidelines that support the previous recommendation that sugars should be less than 10% of total energy intake per day. It further suggests that a reduction of sugar intake to below 5% of total energy intake per day would have additional benefits. 5% of total energy intake is around 25 grams (6 teaspoons) of sugar per day for an adult of normal Body Mass Index (BMI)¹.
- The eating pattern recommended in "Eating Well with Canada's Food Guide" generally meets the recommendation of a diet composed of less than 10% of total energy per day from sugar².
- s.13

Taxation of "junk food" including sugary drinks

- s.13
- The BC Healthy Living Alliance and others have called on the BC government to introduce a tax on all sugary drinks as a means to address overweight and obesity in this province. Industry has expressed considerable concern regarding this policy approach to address obesity.
- The Federal Government taxes "junk foods" including sugary drinks with the GST.
- All jurisdictions with a sales tax, **except British Columbia and Saskatchewan**, tax junk food including sugary drinks through either PST or HST by adopting the GST guidelines to tax candy, snack food and soft drinks. All Canadian jurisdictions with a sales tax (PST/HST) provide an exemption for basic groceries. By not exempting junk foods from PST, jurisdictions send a clear message that these products are not "basic groceries".
- The demand for sugary drinks goes down when prices go up. A low level tax, such as PST, is not expected to significantly change consumption behavior. Studies estimate that a 10% increase in the price of sugary drinks would reduce the consumption by 8 to 12.6%^{3,4}. However, the effects of a price increase could be higher for heavy users of sugary drinks⁵.

¹ WHO (2014). WHO opens public consultation on draft sugars guideline. WHO media center. <http://www.who.int/mediacentre/news/notes/2014/consultation-sugar-guideline/en/>

² Hasan Hutchinson, Health Canada's Director General for Nutrition (personal communication, 2014).

³ Andreyeva T, Long MW, Brownell KD. The impact of food prices on consumption: A systematic review of research on price elasticity of demand for food. Am J Pub Health 2010;100:216-222.

- In a recent intervention, increasing the price of sugary drinks by 35% resulted in a 26% decrease in sales. Sales decreased by an additional 18% when coupled with an educational campaign about the positive health impact of reducing sugar consumption⁶.

s.13

B.C.'s approach:

- B.C. wants to make sure British Columbians have the information they need to make healthy choices. Our approach to date has been to work collaboratively with the food industry to provide education and increase awareness of consumers so that they can make informed decisions about the food they eat.
- B.C. initiatives that support the public to reduce sugar consumption include:
 - The Informed Dining program works with the restaurant sector to provide full nutrition information, including sugar content, of standard menu items to consumers at the point of ordering.
 - Sugary drink reduction is a key priority of Healthy Families BC, which includes key tips, tools and information for British Columbians regarding how to reduce sugary drink consumption. See <http://www.healthyfamiliesbc.ca/home/articles/topic/sugary-drinks>.
 - The 2013 edition of the *Guidelines for Food and Beverage Sales in B.C. Schools* provides mandatory guidelines for all B.C. public schools and defines the minimum nutrition standards that schools are required to apply for all food and beverages sold to students. It also prohibits the sale of sugary drinks, like pop, sports drinks, energy drinks, lemonades, fruit cocktails, and more anywhere in B.C. schools.
 - The *Healthier Choices in Vending Machines in B.C. Public Buildings Policy* outlines minimum nutrition standards for pre-packaged food sold in vending machines. Vending machines compliant with the policy do not provide sugary drinks.

⁴ Smith TA, Lin BH, Lee JY. Taxing calorie sweetened beverages: Potential effects on beverage consumption, calorie intake, and obesity. USDA Economic Research Report 2010;100: 1-23.

⁵ Gustavsen GW, Rickertsen K. Public policies and the demand for carbonated SSBs. Working paper prepared for presentation at the XIth Congress of the European Association of Agricultural Economists. Copenhagen, Denmark: 2005.

⁶ Block JP, Chandra A, McManus KD, Willett WC. Point-of-purchase price and education intervention to reduce consumption of sugary soft drinks. Am J Pub Health 2010;100:1427-1433.

Taylor, Coral L HLTH:EX

From: Cramb, Lorrie HLTH:EX
Sent: Tuesday, June 10, 2014 12:44 PM
To: Paton, Arlene HLTH:EX; Herman, Matt HLTH:EX
Cc: Forster-Coull, Lisa HLTH:EX
Subject: RE: MTL on Bill Good - Sugar Tax

Thanks Arlene!

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From: Paton, Arlene HLTH:EX
Sent: Tuesday, June 10, 2014 12:38 PM
To: Herman, Matt HLTH:EX; Cramb, Lorrie HLTH:EX
Subject: Fw: MTL on Bill Good - Sugar Tax

Here's the transcript!

From: Jabs, Ryan GCPE:EX
Sent: Tuesday, June 10, 2014 12:02 PM Pacific Standard Time
To: Paton, Arlene HLTH:EX
Cc: Anderson, Kristy GCPE:EX
Subject: MTL on Bill Good - Sugar Tax
Hi Arlene,

The minister asked that I send this along to you, as he called in yesterday when listening to Bill Good about taxing sugary drinks. I've highlighted his comments below.

Ryan

s.3

Page 010 to/à Page 011

Withheld pursuant to/removed as

s.3

Taylor, Coral L HLTH:EX

From: Paton, Arlene HLTH:EX
Sent: Wednesday, May 21, 2014 8:00 AM
To: Cowan, Darynn HLTH:EX; Herman, Matt HLTH:EX; Cramb, Lorrie HLTH:EX
Subject: Fw: Health Hot Issues Summary - Wednesday, May 21, 2014

Hi all -- Seeing Tom's article today on taxing sugary drinks - and sugar came up in the discussion I had with the Select Standing Committee on Health - can we make sure we've got a response for estimates - I think there's a note on sugary drinks but maybe not on sugar per se? Just an email with some bullets if the fact sheet doesn't address it directly.

From: Nicole.Beneteau@gov.bc.ca [mailto:Nicole.Beneteau@gov.bc.ca]
Sent: Wednesday, May 21, 2014 07:00 AM Pacific Standard Time
To: Beneteau, Nicole GCPE:EX
Subject: Health Hot Issues Summary - Wednesday, May 21, 2014

s.3

Page 013 to/à Page 040

Withheld pursuant to/removed as

s.3

Taylor, Coral L HLTH:EX

From: Cramb, Lorrie HLTH:EX
Sent: Monday, June 23, 2014 4:53 PM
To: Herman, Matt HLTH:EX; Paton, Arlene HLTH:EX; Forster-Coull, Lisa HLTH:EX
Subject: FW: California soda tax fails to pass senate

fyi

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From: Baker-French, Sophia HLTH:EX
Sent: Monday, June 23, 2014 3:25 PM
To: Cramb, Lorrie HLTH:EX; Yandel, Margaret HLTH:EX; McKellar, Lisa HLTH:EX
Subject: California soda tax fails to pass senate

FYI

<http://www.canada.com/health/California+bill+requiring+warning+labels+sugary+drinks+fails+lawmakers/9948266/story.html>

Sophia Baker-French, MSc RD
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Taylor, Coral L HLTH:EX

From: Forster-Coull, Lisa HLTH:EX
Sent: Monday, August 25, 2014 11:41 AM
To: Paton, Arlene HLTH:EX; Herman, Matt HLTH:EX; Forster-Coull, Lisa HLTH:EX; Cramb, Lorrie HLTH:EX
Cc: Muller, Bev HLTH:EX; Codner, Tamara A HLTH:EX; McKellar, Lisa HLTH:EX; Baker-French, Sophia HLTH:EX
Subject: s.13
Attachments:

Follow Up Flag: Follow up
Flag Status: Flagged

Hello Arlene, Matt and Lorrie.

s.13

- In BC, all food, including junk food, is PST exempt but only basic groceries are GST exempt. With the transition from the HST to the PST/GST system, junk food actually went from having a 12% HST to having 5% GST and no PST.
- The Prevention Strategy highlights the need for comprehensive approaches and economic levers (like taxes) are an important part of comprehensive approaches. Healthy Families BC is targeting junk food intake through policy (school food guidelines and vending guidelines) and through awareness/education (sodium reduction and sugary drink reduction campaigns).s.13

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- s.13

- An Australian assessment of cost effectiveness of prevention interventions reported that a 10% tax on unhealthy foods was associated with a large impact on population health. Researchers estimate that a 10% increase in the price of sugar-sweetened beverages would reduce the consumption by 8 to 11%.

I am looking forward to the meeting and so appreciate your support. Lisa

Lisa Forster-Coull, MSc, RD, FDC
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CURRENT SITUATION

With the conversion back from HST to PST and GST, there is an opportunity to correct the PST exemption on candy, snack food and soft drinks. BC is one of only two jurisdictions in Canada that exempt candy, snack food and soft drinks from PST.

| Interjurisdictional Comparison | | |
|---|---|---------------------------------------|
| Tax Treatment of Candy, Snack Food and Soft Drinks | | |
| Province | Provincial Sales Tax on Candy, Snack Food and Soft Drinks | Food Exemption Matches GST Guidelines |
| British Columbia | No | No |
| Saskatchewan | No | No |
| Manitoba | Yes | Yes |
| Prince Edward Island | Yes | Yes |
| Quebec Sales Tax | Yes | Yes |
| Harmonized Sales Tax (Ontario, Nova Scotia, New Brunswick, Newfoundland) | Yes | Yes |

All Canadian jurisdictions with a sales tax provide an exemption for basic groceries. But all jurisdictions except British Columbia and Saskatchewan tax candy, snack food and soft drinks through either PST or HST.

DEFINING HEALTHY AND UNHEALTHY FOODS

A challenge with imposing tax on candy and snack food is defining the line between exempt groceries and taxable products. As indicated in the above table, other provinces have addressed this issue by adopting the GST guidelines to tax candy, snack food and soft drinks¹. This avoids imposing an additional administrative burden on retailers because they only have one set of rules to apply. Retailers are already familiar with, and applying, these GST rules.

A number of foods subject to GST are generally considered healthy choices, including some puddings, frozen yogurts, granola, frozen waffles and pancakes, and chocolate milk. In addition, the tax status of

¹ See Attachment 1 for examples of taxable food and beverages under GST.

many foods depends on whether they are purchased as single servings (taxable snack foods) or multiple servings pre-packaged by the manufacturer (basic groceries). Although the GST rules are imperfect, they are used by most other jurisdictions and would be easily implemented. The revenue foregone by the exemption for candy, snack food and soft drinks is estimated to be in the range of \$88 million annually².

DISCUSSION

Most candy, snack food and soft drinks have little or no nutritional value, and do not contribute to good health. The snack food industry generates billions of dollars in revenue each year in Canada and widely promotes its products to adults and children. Repealing the exemption for candy, snack food and soft drinks is consistent with British Columbia's Healthy Families BC strategy.

Advantages

- Removes an exemption for which there is no policy rationale and no public benefit.
- No additional burden for retailers as they currently collect GST on products that would become PST taxable.
- Generates additional provincial revenue in the range of \$88 million annually.
- A precedent exists in most of the provinces, as well as, under the GST/HST for the taxation of candy, snack food and soft drinks.
- Contributes to British Columbia's Healthy Families BC strategy.

Potential Disadvantages

- Requires statutory amendments to the *Social Service Tax Act*.
- May not be well received by the business community because it requires that they collect additional tax and places them at increased risk of audit assessments.
- May generate complaints from the general public because the list of taxable foods includes a number of products that are healthy, such as granolas, puddings, and chocolate milk.

The above discussion is not related to Special Sales Taxes that are often described in the media such as a "sugary drink tax" on sugar sweetened beverages or "fat tax" on foods high in saturated fat. These Special Sales Taxes are economic levers that would be imposed above and beyond PST and GST.

RECOMMENDATIONS

1. Repeal the PST exemption for candy, snack food and soft drinks and impose tax on food products based on the GST rules.
2. BC Ministry of Finance lobby the Federal Ministry of Finance to review the GST definition of candy, snack food and soft drinks and include improved nutrition criteria and standards consistent with evidence based practice.

² See Attachment 2 for basis of calculating the tax revenue foregone from candy and snack food exemption based on the GST guidelines.

Attachment 1 – Examples of Taxable Food and Beverages under GST

- Carbonated beverages, including carbonated mineral water whether flavoured or not and carbonated non-alcoholic malt beverages.
 - Non-carbonated fruit juice beverages or fruit-flavoured beverages (other than milk-based beverages) that contain less than 25 per cent by volume of a natural or reconstituted fruit juice(s).
 - Powdered fruit-flavoured beverage mixes, which require mixing with water and contain little or no actual fruit (e.g. Tang and Kool-Aid), **but** ice tea mixes are exempt.
 - Beverages, including spring water and chocolate milk (but not unflavoured milk), or pudding including flavoured gelatine, mousse, flavoured whipped dessert product or any product similar to pudding, **except** when:
 - Prepared and pre-packaged specially for consumption by babies.
 - Sold in multiples, pre-packaged by the manufacturer or producer, of single servings (this exception does not apply to fruit-flavoured beverages that contain less than 25 per cent fruit juice).
 - Sold in cans, bottles or other primary containers that contain a quantity exceeding a single serving (this exception does not apply to fruit flavoured beverages that contain less than 25 per cent fruit juice).
- Please note:** A single serving of pudding and similar items is a unit of less than 425 grams. A single serving of a beverage is a unit of less than 600ml.
- Candies, confectionery that may be classed as candy, or any goods sold as candies such as candy floss, chewing gum and chocolate, whether naturally or artificially sweetened, including fruits, seeds, nuts and popcorn that are coated or treated with candy, chocolate, honey, molasses, sugar, syrup or artificial sweeteners.
 - Chips, crisps, puffs, curls or sticks, such as potato chips, corn chips, cheese puffs, potato sticks, bacon crisps and cheese curls, or similar snack foods, or popped popcorn and brittle pretzels, **but not** including any product that is sold primarily as a breakfast cereal.
 - Salted nuts or salted seeds.
 - Granola products, **but not** including any product sold as a breakfast cereal.
 - Snack mixtures that contain cereals, nuts, seeds, dried fruit or any other edible product, **but not** including any mixture sold as a breakfast cereal.
 - Ice lollies, juice bars, juice sticks, flavoured, coloured or sweetened ice waters, or similar products, whether frozen or not.
 - Ice cream, ice milk, sherbet, frozen yoghurt, trifle, ice cream cake or frozen pudding, non-dairy substitutes for any of these products including any item that contains any of those products, when packaged or sold in single servings of less than 500ml or 500 grams. These items sold in multiples of single servings are also taxable.
 - Fruit bars, rolls or drops or similar fruit-based snack foods.
 - Cakes, muffins, pies, pastries, tarts, flans, cookies, doughnuts, brownies, graham crackers, croissants with sweetened filling or coating, or similar products when sold to consumers in quantities of less than six items, each of which is a single serving of less than 230 grams, but bread products such as bagels, English muffins, croissants or bread rolls, that are without sweetened filling or coating are exempt.
 - Sweetened crepes and pancakes.
 - Waffles.

Page 047

Withheld pursuant to/removed as

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Taylor, Coral L HLTH:EX

From: Jabs, Ryan GCPE:EX
Sent: Monday, September 8, 2014 3:49 PM
To: Cramb, Lorrie HLTH:EX; Forster-Coull, Lisa HLTH:EX; Herman, Matt HLTH:EX; Paton, Arlene HLTH:EX
Cc: Lindstein, Sarah GCPE:EX
Subject: FW: HSF Sugar Position Statement Announcement Sept 9
Attachments: HSF Sugar Position Release FINAL Sept 3 2014.docx; Sugar-Eng.pdf; HSF Sugar Position Backgrounder for Canadians final Sept 3 2014.docx

Importance: High

Hi,

Could you let us know our position on each of the HSF's recommendations for provinces? The minister will be doing an announcement tomorrow, and I'd like to make sure he's aware.

Ryan Jabs
Director of Communications - Ministry of Health
Government Communications and Public Engagement
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Cell: (250) 413-7121
Ryan.Jabs@gov.bc.ca

From: Mary Stambulic [<mailto:MStambulic@hsf.bc.ca>]
Sent: Monday, September 8, 2014 2:34 PM
To: Herman, Matt HLTH:EX; Forster-Coull, Lisa HLTH:EX; Cramb, Lorrie HLTH:EX; Jabs, Ryan GCPE:EX
Cc: Mark Collison; Erika Callowhill
Subject: HSF Sugar Position Statement Announcement Sept 9

Good afternoon all,

I am sending you this note and attachments to give you the heads up that the Heart and Stroke Foundation will be releasing its national position statement on sugar **tomorrow**. We believe that media may be interested in this and expect some uptake. Please note that the release, backgrounder and position statements are **embargoed** until tomorrow's release.

Attached are the following documents:

- Release – **under embargo until Sept 9**
- Position statement – **under embargo until Sept 9**
- Backgrounder for Canadians – **under embargo until Sept 9** and will be posted on the website at that time

Should you have any questions, please don't hesitate to contact me and thank you in advance for respecting the embargo.


Kind regards,

Mary

Mary Stambulic

Manager, Advocacy and Stakeholder Relations | BC & Yukon
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The Heart and Stroke Foundation urges Canadians to cut back on added sugar, for their hearts' sake

-- New position statement provides guidance on sugar consumption --

Ottawa –September 9, 2014 —The Heart and Stroke Foundation today released a position statement proposing a maximum daily limit of added sugar to help Canadians improve their diets and their overall health. It is the first organization in the country to provide this concrete guidance.

Currently Canadians are eating too much of the sweet stuff, in all its forms. It is estimated that we are consuming more than 13 per cent of our total calorie intake from added sugars. The Foundation is recommending that Canadians limit their intake of added (or “free”) sugars to not more than 10 per cent or ideally less than 5 per cent of total calorie intake per day. Excess sugar consumption is linked to heart disease, stroke, obesity, diabetes, high blood cholesterol, cancer and cavities.

“The bottom line is that Canadians are eating too much added sugar, and this can result in serious health consequences,” says Bobbe Wood, President, Heart and Stroke Foundation. “Identifying a daily threshold for added sugar is a first step to helping all Canadians reduce how much sugar they consume, and will improve their diets overall.”

Added sugars are those added to foods and drinks and include glucose, fructose, sucrose, brown sugar, honey, corn syrup, maple syrup, molasses, fruit puree and juice etc. These sugars provide extra calories but few or no nutritional benefits. Fruit juice, either as a beverage or as a sweetener added to other foods, has less nutritional value than a piece of fruit and is high in sugar.

Added sugars do not include the sugars that are found naturally in foods such as vegetables, fruit, milk, grains and other plant-based foods (e.g., legumes and nuts).

To put the recommendation into context, for an average 2,000-calorie-a-day diet, 10 per cent is about 48 grams, or 12 teaspoons of sugar. Sugar-loaded beverages are the single greatest contributor of sugar in our diets with one can providing 40 grams, or 10 teaspoons of sugar. That’s roughly 85 per cent of the daily added sugar limit.

“We want Canadians to focus on reducing added sugars, not the sugar that occurs naturally in vegetables, fruit and other foods that are also packed with nutrients such as vitamins and fibre. You cannot compare those healthy choices to a can of pop that is loaded with sugar and has no health benefits – just health risks,” says Bobbe Wood.

Heart and Stroke Foundation

The position statement includes recommendations for Canadians, all levels of government, workplaces, schools, researchers, health organizations and industry to help reduce added sugar consumption across the population.

The Foundation developed the position statement with input from a panel of national and international experts, and the recommendations are in line with draft guidelines released by the World Health Organization in March 2014.

Up to 80 per cent of early heart disease and stroke can be prevented by adopting healthy behaviours which include eating a healthy diet.

Useful Links

[Sugar position statement](#)

[A backgrounder for Canadians including tips for reducing added sugar](#)

[Recipes](#)

-30-

The Heart and Stroke Foundation's mission is to prevent disease, save lives and promote recovery. A volunteer-based health charity, we strive to tangibly improve the health of every Canadian family, every day. Healthy lives free of heart disease and stroke. Together we will make it happen. heartandstroke.ca

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SUGAR, HEART DISEASE AND STROKE

FACTS

- Heart disease and stroke are leading causes of death in Canada, responsible for 27.3% of all deaths.¹ Over 1.3 million Canadians are living with heart disease² and 315,000 Canadians are living with the effects of stroke.³
- More than 60% of Canadian adults⁴ and 31% of children and youth aged 5 to 17 years are overweight or obese.⁵ Children who are obese are at increased risk of remaining overweight or obese as adults.⁶
- Up to 80% of early heart disease and stroke can be prevented through adopting healthy behaviours including eating a healthy diet.
- Sugar is a carbohydrate that provides energy to the body. Other than providing energy, sugar has no other nutritional benefits.
- Sugar can occur naturally in milk, fruit, vegetables, starches, grains and most plant based foods. Sugars can also be added to foods and drinks for flavour, as a sweetener, as a preservative or to enhance the texture of products.
- Free sugars include all monosaccharides and disaccharides added to foods by the manufacturer, cook or consumer, plus sugars naturally present in honey, syrups and fruit juices.⁷
- It is estimated that Canadians consume as much as 13% of their total calorie intake from added sugars.^{8,9} This added sugar estimate does not take into account the broader range of sugars captured by free sugars (which also include 100% fruit juice, honey, etc.). Consumption of free sugars among Canadians would be higher than 13%.
- Ten per cent of total energy (calories) from free sugars in a 2,000-calorie-a-day diet is equivalent to about 48 grams (roughly 12 teaspoons) of sugar. Five per cent of total energy is equivalent to about 24 grams (roughly 6 teaspoons) of sugar.
- Excess sugar consumption is associated with adverse health effects including heart disease,¹⁰⁻¹² stroke,¹⁰ obesity,¹³⁻¹⁷ diabetes,¹⁸⁻²² high blood cholesterol,²³⁻²⁴ cancer²⁵ and dental caries (cavities).²⁶
- Individuals who consume greater than or equal to 10% but less than 25% of total energy (calories) from added sugar have a 30% higher risk of death from heart disease or stroke when compared to those who consume less than 10%. For those who consume 25% or more of calories from added sugar, the risk is nearly tripled.¹⁰
- While there are a variety of causes of obesity, researchers speculate that excess caloric intake may be the single largest driver.²⁷ Larger portion sizes contribute to over consumption of calories and excess body weight.¹⁶
- Sugar sweetened beverages (SSBs) are the single largest contributor of sugar in the diet.¹⁰ A single 355 mL can of sugar-sweetened soda contains up to 40 grams (about 10 teaspoons) of sugar and no health benefits.²⁸
- The total volume of SSBs available to Canadians is 3.5 billion litres, the equivalent of 110 L per person per year or over 300 mL per day.²⁹ A standard sized soft drink can is 355 mL.
- As children get older, they consume more sugar from soft drinks. Boys' average daily consumption of regular soft drinks is 68 grams at ages 4 to 8 years and increases to 376 grams at ages 14 to 18 years. Among girls the increase is from 47 to 179 g.³⁰



- A tax of 5 cents per 100 mL on SSBs would raise \$1.8 billion in tax revenue annually.²⁹
 - Worldwide it is estimated that 180,000 deaths annually are attributed to the consumption of SSBs, including 133,000 from diabetes, 44,000 from cardiovascular disease, and 6,000 from cancer.³¹
 - Various organizations including the World Health Organization and groups in the United States,^{11,32,33} United Kingdom,^{34,35} Italy,³⁶ and Scotland³⁷ have developed recommendations for reduced sugar consumption among their populations.
- Avoiding consumption of sugar-loaded beverages such as soft drinks, sports drinks, fruit drinks and juices, and ready-to-drink tea and coffee beverages. Satisfy your thirst with water.
2. Work with organizations like the Heart and Stroke Foundation to influence the government and the food industry to reduce free sugars in the food supply. Visit heartandstroke.ca to learn more and get involved.
 3. Promote and encourage adoption of food policies that create healthier environments in places we live, work and gather such as schools, workplaces, sports clubs, faith centres, and community organizations.

RECOMMENDATIONS

The Heart and Stroke Foundation recommends that an individual's total intake of free sugars not exceed 10% of total daily calorie (energy) intake, and ideally less than 5%.

The Heart and Stroke Foundation recommends that:

CANADIANS

1. Reduce free sugars consumption by:
 - Preparing meals using fresh and staple foods.
 - Developing and sharing skills in food preparation and cooking.
 - Limiting eating out at restaurants and consumption of ready-to-eat food and drink products. If eating out, choose restaurants that serve freshly made unprocessed dishes and provide nutrition information to make a healthy choice.
 - Buying foods in shops and markets that offer a variety of fresh foods. Avoiding those that sell mainly ready to eat products.
 - Buying fresh or frozen fruit, or fruit canned in water without artificial sweeteners.
 - Reducing the amount of sugar used during preparation of food and in recipes.
1. Adopt the free sugars thresholds proposed by the Heart and Stroke Foundation, specifically, a free sugars intake of less than 10 per cent of total daily energy intake, and ideally less than 5 per cent.
 2. Conduct surveillance to:
 - Measure free sugars intake of Canadians and continue to measure intake over time.
 - Assess free sugars content of foods.
 - Establish targets for the food industry to decrease free sugars content in foods, monitor free sugars levels in foods and develop benchmarks towards reduction of free sugars in the food supply.
 3. Ensure clear and comprehensive nutrition labelling of the free sugars content in the Nutrition Facts table of all packaged foods, grouping all sugars together when listing ingredients on product packaging, and standardized serving sizes on the Nutrition Facts table.
 4. Restrict the marketing of all foods and beverages to children.
 5. Educate Canadians about the risks associated with free sugars consumption through public awareness and education campaigns.
 6. Support food literacy among Canadians by implementing programs to improve knowledge and skills required to make informed eating decisions and prepare fresh nutritious meals.

7. Continue to support and improve the Nutrition North Canada program to ensure affordable pricing of nutritious foods in remote northern locations.
8. Provide financial, research and policy support to foster growth of local food procurement initiatives and the improvement of food distribution networks that increase access to healthy food (particularly traditional food) for First Nations, Inuit, and Métis populations, as well as others living in northern, remote and rural communities. This should include access to safe drinking water as a healthy alternative to sugar-loaded drinks.
9. Develop agricultural policies and subsidies that provide incentives for the production and distribution of healthy foods (particularly vegetables and fruit) in order to improve accessibility and affordability.
10. Adopt a tax on beverages high in free sugars (energy dense, nutrient poor). The tax should be an excise tax and be based on free sugars per unit. Revenues from such a taxation stream should be used to subsidize vegetables and fruit to make healthy eating more affordable.
11. Avoid public health partnerships with producers and suppliers of foods high in free sugars.

PROVINCIAL/TERRITORIAL GOVERNMENTS

1. Adopt a tax on beverages high in free sugars (energy dense, nutrient poor). The tax should be an excise tax and be based on free sugars per unit. Revenues from such a taxation stream should be used to subsidize vegetables and fruit to make healthy eating more affordable.
2. Restrict the marketing of all foods and beverages to children.
3. Ensure nutritional information of all foods sold in food service outlets and restaurants are readily available to consumers at point of purchase. Specifically:
 - Sodium and calories on overhead menu boards of food service outlets, and
 - Free sugars, sodium, trans fats, saturated fats, and calories on table menus in restaurants.
4. Adopt food policies in public places like schools and government buildings that limit availability of processed foods and beverages high in free sugars.

5. Limit portion size of sugar-loaded beverage containers at food service locations to a maximum of 16 ounces (500 mL) to reduce consumption of sugary drinks.

MUNICIPAL GOVERNMENTS, REGIONAL HEALTH AUTHORITIES, WORKPLACES AND SCHOOL BOARDS

1. Enable the establishment of Food Policy Councils and Food Charters that promote and develop local policies, programs and strategies related to access of healthy unprocessed foods.
2. Limit the consumption of sugar-loaded beverages through a variety of policies including restricting the portion size to 16 ounces (500 mL) in food service outlets and banning sugar-loaded beverages in public facilities such as recreation centres, hospitals, and schools.
3. Ensure potable drinking water (in fountains and/or coolers) is accessible to children and adults in commonly used places including parks, public facilities, schools, recreation centres, and workplaces as a hydration alternative to sugar-loaded beverages.
4. Establish policies and zoning by-laws designed to promote the establishment of grocery stores and other venues (e.g., farmers' markets, community gardens, community kitchens, convenience stores, etc.) that provide affordable access to healthy food, particularly in areas of low availability and restrict accessibility of fast food outlets and convenience stores near schools.
5. Support community programs and initiatives that can potentially improve access to healthy food including community gardens, community kitchens, local food distribution networks, community supported agriculture, school meal programs, etc.
6. Develop, implement and monitor school food policies that increase access to affordable healthy food and beverages while decreasing access to unhealthy choices. For example:
 - Implement and enforce nutrition standards for food and beverages provided at school venues including cafeterias and vending machines.
 - Offer guidance to parents and students on healthy bag lunch and snack options.

- Make healthy food (particularly vegetables and fruit) readily available. This can be accomplished, for example, through supporting and participating in programs that help bring healthy food to schools (e.g., Farm to Cafeteria Canada's Farm to Schools program, FoodShare, and Breakfast for Learning) and the establishment of school community gardens.
- Use healthy foods and beverages or non-food alternatives for school fundraising efforts.

RESEARCHERS

1. Conduct research to quantify free sugars in the Canadian food supply and measure consumption of free sugars among Canadians of various age groups and populations. Use national surveys to continue to quantify free sugars intake over time.
2. Undertake research on behavior change approaches to promote the reduction of free sugars consumption, in particular reduction of sugar-loaded beverage consumption.
3. Use modeling to quantify the economic and public health impacts of policy measures to reduce the intake of free sugars and unhealthy foods.

FOOD AND BEVERAGE INDUSTRY, MANUFACTURERS, AND RETAILERS

1. Reduce free sugars content in the food environment through a variety of approaches such as:
 - Reformulating products to contain less free sugars.
 - Reducing portion sizes of energy dense, nutrient poor food and beverage products.
 - Diversifying to develop products that are healthy alternatives that are low in free sugars, unhealthy fats, and sodium.
2. Disclose the amount of free sugars on the Nutrition Facts table of packaged goods.
3. Stop the practice of marketing of foods and beverages to children.
4. Ensure that product placement of sugary foods and beverages do not influence children. Energy dense, nutrient poor products should not be placed at children's eye level or at check-out locations. Instead, healthy products should be placed in highly visible areas.

5. Improve the nutritional quality of foods that are available in school environments and remove junk foods from school vending machines and cafeterias, including high fat and high sugar foods and beverages.
6. Make the healthy choice the less expensive choice and promote these choices.
7. Improve nutrition information available to consumers in restaurants. Canadians should have access to better nutrition information on the overhead and table menus to help make healthier choices at the point of purchase.
8. Ensure food labelling, packaging, and health claims meet high standards and provide accurate and honest depictions of content.
9. Use all available strategies to support public health efforts to create healthier food systems. This includes monitoring progress towards a healthier food system by sharing relevant data with governments and assessment institutions.
10. Ensure healthy foods and beverages are affordable and accessible.
11. Limit the use of artificial sweeteners and sugar substitutes in products.

HEALTH-RELATED EDUCATIONAL INSTITUTIONS

Educate health professionals about the health risks of excess free sugars consumption, how to reduce free sugars intake within the context of a healthy diet and how to counsel their patients/clients to reduce free sugars intake.

BACKGROUND INFORMATION

WHAT IS SUGAR?

Sugar is a carbohydrate that provides energy to the body. Other than providing energy, sugar has no other nutritional benefits. Sugar can occur naturally in fruit, vegetables, starches, grains and most plant based foods (e.g., lactose in milk, or fructose in vegetables and fruit). Sugars are also added to foods and drinks for flavour, as a sweetener, as a preservative or to enhance the texture of products.

There are a number of definitions and terms used to describe sugars in foods.³⁸ The World Health Organization defines 'free sugars' as sugars and syrups added to foods

during processing or preparation.⁷ This definition includes all monosaccharides and disaccharides added to foods by the manufacturer, cook or consumer, plus sugars naturally present in honey, syrups and fruit juices. This definition does not include sugars found in milk, vegetables, fruit, legumes, grains, seeds and nuts. Foods like vegetables and fruit with natural sugars also contain fibre and nutrients which provide health benefits. The sugar found in vegetables and fruit is also referred to as bound sugar. The positive benefits of consuming vegetables and fruit is clear (see Heart and Stroke Foundation's Position Statement titled Vegetable & Fruit Consumption and Heart Disease and Stroke³⁹). Evidence is also clear that chronic overconsumption of sugar in foods with no or little nutritional value (e.g., sugar sweetened beverages (SSBs) and liquid sugars) leads to unfavourable health effects.¹⁰⁻²⁶

HEALTH EFFECTS OF SUGAR

There is a body of evidence indicating that excess sugar consumption is associated with adverse health effects including heart disease,¹⁰⁻¹² stroke,¹⁰ obesity,¹³⁻¹⁷ diabetes,¹⁸⁻²² high blood cholesterol,^{23, 24} cancer²⁵ and dental caries (cavities).²⁶

There is a clear relationship between sugar and obesity. A systematic review of the evidence conducted in 2013 concluded that reduced intake of dietary free sugars results in weight loss and increased sugar intake is associated with weight increase.¹⁶ Evidence from this review further indicates that intake of sugar sweetened beverages (SSBs) is a determinant of body weight and the overconsumption of empty calories contributes to weight gain.

Individuals who have a dietary pattern that includes more than one SSB and fruit juice serving per day have a higher risk of developing chronic disease, particularly coronary heart disease and diabetes.⁴⁰ Women who consumed 2 to 3 SSBs per day had a 31 per cent greater risk of developing type 2 diabetes compared to women who consumed less than 1 SSB per month.⁴¹ The Nurses Health Study of over 88,000 women followed for 24 years, found that those who consumed 2 SSBs or more per day had a 35 per cent greater risk of developing coronary heart disease compared with those who consumed less than 1 SSB per month.⁴² In a similar analysis of the Physicians Health Study,⁴³ researchers found that consumption of SSBs was associated with a

significant increased risk of coronary heart disease (CHD), even after adjustment for lifestyle factors including overall diet quality and body mass index. For each serving-per-day increase in SSB intake, the risk of CHD increased by 19 per cent. Individuals who consume fewer SSBs have less chronic disease risk.⁴⁴

SSBs are also associated with greater risk of death from chronic disease. Preliminary research presented at the American Heart Association's Epidemiology and Prevention/Nutrition, Physical Activity and Metabolism 2013 Scientific Sessions suggests sugary beverages are to blame for about 183,000 deaths worldwide each year, including 133,000 diabetes deaths, 44,000 heart disease deaths and 6,000 cancer deaths.³¹ The death rates associated with sweetened beverages were highest in those under the age of 45. A study published in early 2014 found that individuals who consume greater than or equal to 10 per cent but less than 25 per cent of total energy (calories) from added sugar have a 30 per cent higher risk of death from heart disease or stroke when compared to those who consume less than 10 per cent. For those who consume 25 per cent or more of calories from added sugar, the risk is nearly tripled. As added sugar consumption increases, the risk of death from heart disease and stroke increases.¹⁰

A 2014 systematic review of the effects of restricting sugar intake on dental caries²⁶ found that there was no harm associated with reducing the intake of free sugars to less than 5 per cent of total energy, particularly when considering the risk of dental caries throughout the life-course.

SUGAR CONSUMPTION IN CANADA

The average total intake of sugar among Canadian adults is approximately 110 grams per day, equivalent to approximately 26 teaspoons or 21 per cent of total energy intake, based on a 2,000 calorie-a-day diet.⁴⁵ Total sugar intake represents sugars from all sources including sugars found in milk products, vegetables and fruit.

Of the average 110 grams of total sugar consumed per day by Canadians, 31 per cent is from vegetables and fruit and 35 per cent is from 'other' foods that don't fit within the four food groups of Eating Well with Canada's Food Guide, which includes items such as soft drinks and candy that are high in added sugars.⁴⁵ The percentage of sugar derived from confectionary items (for instance, chocolate bars and



candies) was about twice as high for children (9 per cent) and adolescents (10 per cent) as for adults (5 per cent). Regular soft drink consumption increases with age. In Canada, regular soft drinks account for 4 per cent of children's average sugar intake and among adolescents, the figure rises to 14 per cent.

The Canadian Sugar Institute reports that the current average Canadian intake of added sugars is estimated to be between 11 and 13 per cent of total energy intake (calories).⁸ The World Health Organization estimates that Canada's added sugar consumption level is about 13 per cent of total energy intake.⁹ Given that these estimates of added sugar intake do not take into account the broader range of sugars captured by free sugars (which also include 100 per cent fruit juice, honey, etc.), we can therefore conclude that free sugars consumption among Canadians is higher than 11 to 13 per cent.

SUGAR THRESHOLDS

Eating Well with Canada's Food Guide recommends that Canadians limit the consumption of sugar, salt and fat. The Food Guide does not provide a specific amount of sugar recommended for a healthy eating pattern.

Various organizations including groups in the United States,^{11,32,33} United Kingdom,^{34,35} Italy,³⁶ and Scotland³⁷ have developed recommendations for reduced sugar consumption among their populations. The thresholds and definition of 'sugar' varies among the recommendations, however, organizations recognize the health effects of increased sugar consumption and the need to provide advice to reduce sugar intake among their populations.

In March 2014, the World Health Organization released draft recommendations on the consumption of free sugars for adults and children.⁷ These guidelines recommend:

- Reduced intake of free sugars throughout the life-course (strong recommendation).
- In both adults and children, intake of free sugars not exceed 10% of total energy (strong recommendation).
- Further reduction to below 5% of total energy (conditional recommendation).

The Heart and Stroke Foundation supports the draft recommendations of the World Health Organization.

INTERVENTIONS TO REDUCE SUGAR CONSUMPTION

Food education and preparation skills

Adequate food preparation skills are needed to prepare healthy meals. Individuals who lack basic food selection and preparation skills may be more likely to rely on convenience and fast foods. Developing and sharing important life skills like food preparation and cooking can help contribute to good health. Preparation of foods at home also allows individuals to control the amount of sugar added to meals. Using fresh and staple foods such as whole grains, fresh or frozen fruit and vegetables, and experimenting with recipes to reduce the sugar content are ways to reduce the free sugars content of foods prepared at home. Research shows that initiatives aimed to increase food literacy can be successful in improving healthy eating and cooking habits.⁴⁶

Healthy eating education is important to reducing sugar consumption among Canadians. Improved understanding and awareness of the relationship between free sugars and overall health, including the elevated risk of heart disease, stroke, obesity and other health conditions is important. In addition to the health risks, individuals need to be aware of the amount of sugar they consume in processed and packaged foods, and when eating out. Processed foods are often sweetened with free sugars to make them more appealing. Many foods with free sugars can also be higher in fat, sodium and calories. Limiting consumption of ready to eat food and drink products and eating out at restaurants, cutting back on baked goods and desserts and avoiding sugar-loaded beverages will help reduce free sugars intake. Consumers should look for foods in shops and markets that offer a variety of fresh foods and avoid those that sell mainly ready to eat products. This approach to eating has been applauded by experts for its positive impact potential on health outcomes.⁴⁷ Brazil has taken a leadership role in this area and implemented new national recommendations in its food guide, which discourage eating processed foods and encourage whole fresh foods as the foundation of healthy eating.⁴⁸

Nutrition information

The current Nutrition Facts table found on packaged products does not provide the amount of free sugars contained in a product. Clear and comprehensive nutritional labelling of the free sugars content of all packaged foods is needed to help fully inform individuals of the amount

of free sugars in products. The ingredient list on food products can help identify foods that are higher in free sugars. Consumers can look for sugar ingredients in the ingredient list such as sucrose, dextrose, liquid invert sugar, corn syrup, high fructose corn syrup and molasses. The U.S. recently proposed revisions to its nutrition facts label with the aim to improve dietary habits through clear and concise information on added sugar content and calories of food products.⁴⁹ Similarly, Health Canada recently also proposed revisions to its Nutrition Facts table, including the provision of information on total and added sugar content. The Heart and Stroke Foundation believes that these revisions are promising. However, it is also the Foundation's position that it is preferable to follow the World Health Organization's approach and expand the added sugar definition to include free sugars. Furthermore, food and beverage industries, and food retailers should ensure food labelling, packaging, and health claims meet high standards and provide accurate and honest depictions of content. Consumers are often confused by contradictory or misleading product claims. This should be regulated to avoid harm. Serving sizes on Nutrition Facts tables should be standardized.

Ensuring nutritional information is readily available at chain restaurants and food service outlets can also help inform customers about the nutritional value of the foods they consume. Providing the sodium and calorie counts of all foods on overhead menu boards in the food service sector and the free sugars, sodium, trans fats, saturated fats, and calorie counts on table menus in restaurants, can help improve consumer understanding and decision making when eating out. Again, the U.S. leads in this area as New York City mandated restaurant nutrition labelling in 2008 with many regions developing and implementing similar policies. More recently, the U.S. federal government has passed food labelling requirements for restaurants, retail food establishments and vending machines because of the positive impact on dietary habits and the reduction in chronic disease seen elsewhere.⁵⁰

Sugar in liquid beverage form

While sugar is a problematic part of our diet, sugar in liquid beverage form is of particular concern. SSBs such as soft drinks and sports drinks are considered energy-dense, nutrient poor beverages because of their high caloric levels and minimal nutritional value. A single 355 mL can of sugar-sweetened soda contains up to 40 grams (about 10

teaspoons) of sugar and no health benefits.²⁸ Individuals who drink SSBs do not feel as full as they do if they eat the same number of calories from solid food.⁵¹ Furthermore, they do not compensate by eating less, which can lead to excess calorie intake.⁵² Health experts cite SSBs to be a leading driver of obesity and chronic disease. Research shows SSBs to be the largest single source of calories in the North American diet and as such, experts recommend SSB reduction strategies.²⁷ Some jurisdictions including Mexico, France, Denmark, regions in the U.S. and Europe, have mandated a tax on sugar sweetened beverages and sugary foods as a means to deter consumption and/or generate revenues for health promotion programs/healthcare and/or subsidies for healthy foods such as fruits and vegetables.

A restriction on the serving size of sugar-loaded drinks is considered a favourable policy option because it does not remove an individual's choice to consume these drinks; rather it limits the size of a single portion, thereby reducing the calories consumed. Research shows that limiting the portion size of SSB containers at food service locations to reduce consumption of sugary drinks could contribute to reduced intake and lead to reductions in population obesity rates.^{53,54} In addition, California almost approved a bill requiring companies to include safety warning labels on sugar-sweetened beverages as a means to increase awareness of harm and reduce consumption.

In certain settings like schools, recreation facilities and public spaces, SSBs and energy dense, nutrient poor foods have been eliminated through procurement policies. Creating healthy food environments and limiting availability of processed foods and beverages high in free sugars in places we live, work and gather such as schools, hospitals, workplaces, sports clubs, faith centres, and community organizations can contribute to reduced sugar consumption. Organizations such as Canadian Centre for Occupational Health, Dietitians of Canada, Community Food Centres Canada, and Food Secure Canada have resources to assist in the development of healthy food policies. There are many U.S. and Canadian jurisdictions with policies to restrict sales of SSBs on school properties, in daycares or in recreation centres in an effort to create a healthy environment for local children and youth.⁵⁵ In addition, ensuring that potable drinking water (in fountains and/or coolers) is accessible to children and adults in these settings may contribute to reduced sugar-loaded beverage consumption. Replacing



sugar-loaded beverage intake with water could result in a reduction in total energy intake and reduced rates of obesity. One study of elementary school aged children found reduced rates of obesity after an intervention provided water fountains in schools.⁵⁶

School food policies

Establishing healthy eating habits early in life are important to promote good health throughout the life continuum. School food policies that increase access to affordable healthy food and beverages while decreasing access to unhealthy choices can help foster healthy habits early in life. Policies including the development of nutrition standards for food and beverages provided at school venues, in school cafeterias and vending machines are important contributors to healthy eating. Such policies exist in the U.S., U.K., throughout Europe and in parts of Canada. Research has demonstrated that these policies are associated with increased fruit and vegetable consumption, decreased calorie intake and in some cases, weight loss among students.^{57,58}

Schools can offer guidance to parents and students regarding healthy bag lunches and snacks. Making healthy food (particularly vegetables and fruit) readily available through supporting and participating in programs that help bring healthy food to schools (e.g., Farm to Cafeteria Canada's Farm to Schools program, FoodShare, and Breakfast for Learning) and the establishment of school community gardens have been shown to educate students on the importance of healthy eating, improve nutritional quality of the diet and help foster life skills.⁵⁹⁻⁶¹ Using healthy foods and beverages or non-food alternatives for school fundraising efforts are additional ways to limit availability of unhealthy foods.

Marketing to children

Children are particularly vulnerable to advertising and marketing messages. Marketing of foods and beverages is associated with higher levels of junk food consumption and obesity.^{33,62-64} In addition, product placement of sugary foods and sugar-loaded beverages influences children and consumer's choices. Restrictions on marketing to children have been cited as the most cost effective approach to reduce childhood obesity.^{65,66} Energy dense, nutrient poor products and sugar-loaded drinks should not be placed at children's eye level or at check-out locations. Instead, healthy products should be placed in highly visible areas.

Recognizing the connection between product placement and unhealthy eating habits in children, Tesco, a major European grocery chain has adopted a policy that removes sugary foods and beverages from placement at children's eye level. Indigo Books, a Canadian retail chain with over 300 bookstores across Canada, has also removed all processed food items including confectionaries from the cash register or 'impulse section' of stores.

Other policies

Increased access to healthy foods is important for health. In Canada 12.2 per cent of Canadian households experience food insecurity.⁶⁷ Local food procurement initiatives and the improvement of food distribution networks can increase access to healthy food (particularly traditional food) for First Nations, Inuit, and Métis populations, as well as others living in northern, remote and rural communities.

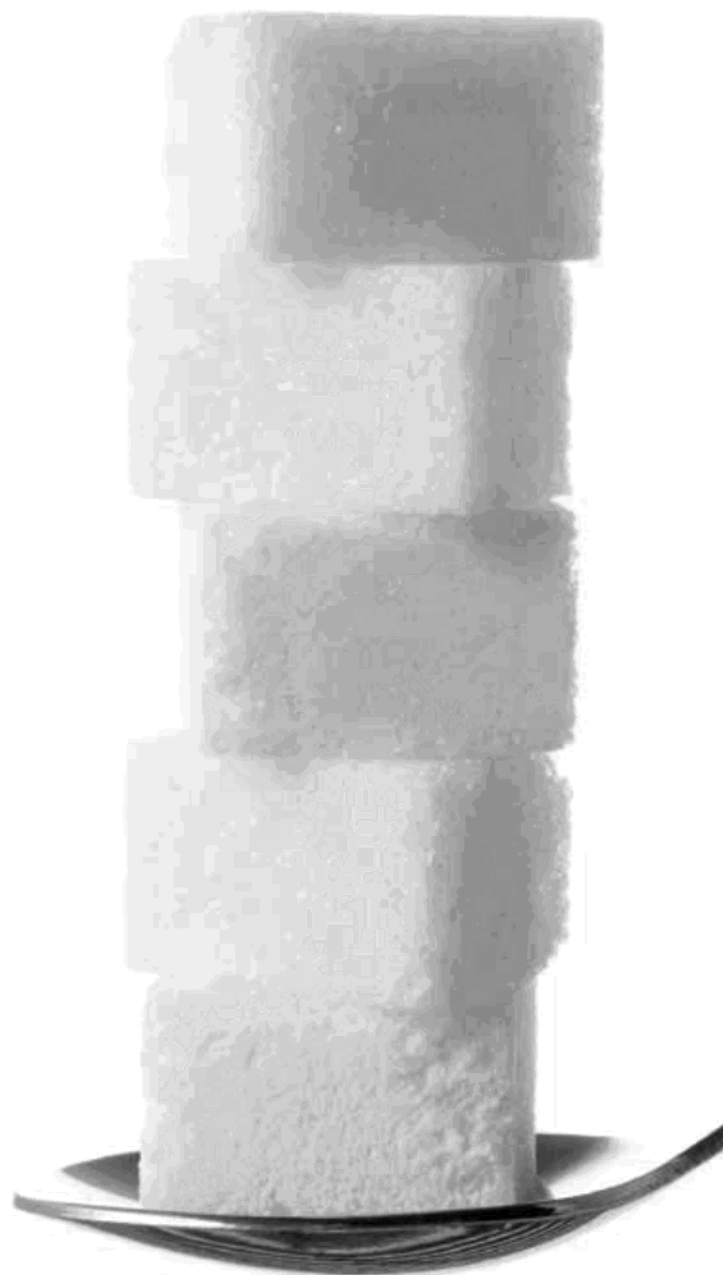
Nutrition North Canada is a food subsidy program in isolated northern locations that is funded by the Federal government. The program seeks to improve access to perishable healthy foods, including fresh, frozen, and refrigerated foods with a shelf-life of less than one year. A higher subsidy applies to the most nutritious options such as fresh fruit, frozen vegetables, bread, meat, milk and eggs. A lower subsidy applies to other eligible foods such as flour, crackers, ice cream and combination foods (e.g., pizza and lasagna).

Development of agricultural policies and subsidies that provide incentives for the production and distribution of healthy foods (particularly vegetables and fruit) will help to improve accessibility and affordability. Access to healthy unprocessed foods can also be improved through the establishment of Food Policy Councils and Food Charters that promote and develop local policies, programs and strategies. Community venues and programs such as community gardens, community kitchens, local food distribution networks, community supported agriculture, and school meal programs can help improve access to healthy foods. Policies and zoning by-laws designed to promote the establishment of grocery stores and other venues (e.g., farmers' markets, community gardens, community kitchens, etc.) can provide affordable access to healthy food, particularly in areas of low availability. Research shows that proximity to fast food outlets and access to fresh food markets are determinants of dietary habits and obesity.^{63,68-71}

Adopting a sugar tax on foods and beverages which are high in sugar is thought to be one of the most cost effective tools to change consumption patterns.⁷¹ The sugar tax should be an excise tax and be based on free sugars per unit. A tax of 5 cents per 100 mL on SSBs would raise \$1.8 billion in tax revenue annually.²⁹ Revenues from such a taxation stream should be used to subsidize vegetables and fruit to make healthy eating more affordable.

Policy strategies to support public health efforts to create healthier food systems can also help reduce free sugars consumption. Free sugars content can be reduced in the food environment through a variety of approaches. Reformulating food products to reduce sugar, sodium and fat content (healthier products) and bringing to market new products which support the goal of improving the healthfulness of foods and beverages are important strategies for the food industry. Companies can diversify to develop healthier products that are lower in free sugars, unhealthy fats, and sodium. Reductions in portion sizes can contribute to reduced sugar consumption. Ensuring that portions and prices are in alignment so as to not promote overconsumption, making the healthy choice the less expensive choice and promoting these healthier choices are approaches being taken in the U.K. as part of the government's Responsibility Deal, which aims to change the food environment and reduce poor health outcomes.

Up to 80 per cent of early heart disease and stroke can be prevented through adopting healthy behaviours including eating a healthy diet. Heart disease and stroke prevention requires a multi-pronged approach. Evidence shows that policy interventions which create healthy supportive environments are the most cost effective option because they are population based, have the greatest impact in terms of sustainable behaviour change and require smaller resource allocation. In addition to policy interventions, health promotion and health education initiatives are required to disseminate healthy living information, and raise public awareness. Ultimately, this multi-pronged package of sugar reduction initiatives will help make the healthy choice the easy choice for Canadians.



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The information contained in this position statement is current as of:
AUGUST 2014

Heart and Stroke Foundation Sugar Position Backgrounder for Canadians

Sept 3, 2014

What is sugar?

Sugar is a carbohydrate that provides energy to the body; it has no other nutritional benefits. **Sugar** can occur naturally in foods such as milk, fruit, vegetables, and other plant-based foods such as legumes and nuts. These foods are also loaded with lots of positive nutrients such as vitamins and fibre, and they help us feel full and satisfied.

Added sugars are those added to foods and drinks and include glucose, fructose, sucrose, brown sugar, honey, corn syrup, maple syrup, molasses, fruit puree and juice etc. These sugars provide extra calories but few or no nutritional benefits. Fruit juice, either as a beverage, or as a sweetener added to other foods has less nutritional value than a piece of fruit and is high in sugar. Added sugars do not include the sugars that are found naturally in foods such as vegetables, fruit, milk, grains and other plant-based foods (e.g., legumes and nuts).

How much added sugar do Canadians currently consume?

The short answer is too much. On average more than 13 per cent of our total calories come from added sugars and this is a conservative estimate. Sugar- loaded beverages are the single greatest contributor of sugar in our diets. These include soft drinks, sports drinks, juices, energy drinks and hot and cold specialty teas and coffees. One can of pop contains 40 grams, or 10 teaspoons of sugar.

How does sugar affect our health?

Consuming too much sugar is associated with heart disease, stroke, obesity, diabetes, high blood cholesterol, cancer and cavities.

What does the Heart and Stroke Foundation recommend?

Canadians are consuming too much added sugar, especially in foods that have little or no nutritional value such as sugar-loaded beverages. The positive benefits of consuming vegetables and fruit are clear.

The Heart and Stroke Foundation recommends that Canadians decrease their consumption of added sugar to no more than 10 per cent of their total daily calories. This does not include sugar that occurs naturally in fruit, vegetables, milk, grains and other foods.

For an average 2,000-calorie-a-day diet, 10 per cent is about 48 grams, or 12 teaspoons of sugar. One can of pop contains about 85 per cent of the daily added sugar limit.

We have developed recommendations for Canadians, all levels of government, workplaces, schools, researchers, health organizations and industry to help reduce sugar consumption across the population. Available at heartandstroke.ca/positionstatements

Sugar reduction tips for Canadians

Thirsty? Drink water or lower fat (2% MF or less) plain milk. Flavour your water with lemon, orange or lime slices, strawberries or fresh mint. Milk has naturally occurring sugar in the form of lactose and provides lots of nutrients, such as calcium and Vitamin D. Soft drinks and fruit drinks are high in sugar, with no nutritional value. Fruit juice is high in sugar with less nutritional value and more sugar than whole fruit.

Time for a coffee or tea break? Be selective and stay away from the fancy drinks with added sugars. Instead of ordering a chai latte, order chai tea and ask them to add steamed milk. Order a latte instead of a mocha coffee. Add the nutmeg and cinnamon toppings provided for extra flavour.

Hungry for a meal? Try whole foods. Whole foods are foods that are as close to their natural state as possible. Examples are: fresh or frozen vegetables and fruit; lean meats, poultry and fish; meat alternatives such as beans, lentils or tofu; whole grains such as brown rice, whole wheat couscous, barley, freekeh and whole grain breads; dairy products such as plain lower fat milk, plain yogurt and cheeses. There are so many delicious options.

Need a snack? Stock up on healthy snacks such as roasted nuts; lower-fat cheese and crackers; veggies and dip; plain yogurt and fresh fruit. Try to avoid baked goods, sweet desserts, candies and chocolates that are all high in added sugar.

Buying breakfast cereal? Choose cereals with less than 6 grams of sugar and more than 4 grams of fibre per 1 cup (30 gram) serving. Look high and low on the supermarket shelves. Many of the healthier cereals will be either on the top or bottom shelves. The sugar sweetened cereals are placed at eye level to make them easy for kids to find.

Cook at home more often. For great ideas on healthy home cooking, visit heartandstroke.ca/recipesfor a wide variety of delicious recipes. Select recipes that are lower in sugar. And, experiment with your favourite recipes by reducing the amount of sugar by one-quarter to one-third. Try vanilla, cinnamon or almond extract to add flavour to your baking without added sugar.

Save restaurants for special occasions. When eating out, choose your restaurant wisely. Look for menus with freshly made unprocessed foods and nutrition information to help you make a healthy choice. Consider sharing a meal or ordering the appetizer size to help limit the portion size.

When you buy packaged foods read the Nutrition Facts table and the ingredient list. Pay special attention to the total amount of sugar and read the ingredient list. The Nutrition Facts table will tell you the total amount of sugar in the product (from both naturally occurring and added sugars) and the ingredient list will let you know where the sugar is coming from. Naturally occurring sugars are found in fruit, vegetables, plain dairy products, starches, grains and plant based foods. These foods provide us with valuable nutrients.

Added sugars such as glucose, fructose, sucrose, honey, evaporated cane juice; fruit puree, molasses, corn syrup, dextrose, concentrated fruit juice, etc. provide calories without nutritional benefits.

Understand what claims for sugar mean on packaged foods.

- **No added sugar**– The product contains no added sugar such as glucose, fructose, honey or molasses. However it may contain naturally occurring sugars such as those from fruit or dairy products.
- **Reduced or lower in sugar** – The food contains at least 25% and 5g less sugar than the food to which it is compared.
- **Unsweetened** – The food contains no added sugars or sweeteners such as aspartame or sucralose.
- **Sugar-free or sugarless**– Each standard serving contains less than 0.5g of sugar and less than 5 calories.

Taylor, Coral L HLTH:EX

From: Jabs, Ryan GCPE:EX
Sent: Monday, September 8, 2014 5:24 PM
To: Lake, Terry; Lake, Terry HLTH:EX; Loiacono, Sabrina JTST:EX; Briggs, Taylor HLTH:EX
Cc: Anderson, Kristy GCPE:EX; Paton, Arlene HLTH:EX; Brown, Stephen R HLTH:EX
Subject: Heart & Stroke - release tomorrow - Sugar Position Statement
Attachments: HSF Sugar Position Release FINAL Sept 3 2014.docx; Sugar-Eng.pdf; HSF Sugar Position Backgrounder for Canadians final Sept 3 2014.docx; RE: HSF Sugar Position Statement Announcement Sept 9

Minister,

I'll raise this on tomorrow's call: Heart and Stroke Foundation just sent through the attached embargoed release and backgrounder, which they'll be putting out tomorrow on sugar. It makes a number of recommendations to various levels of government, including the following five to provincial governments:

s.13

Ryan Jabs
Director of Communications - Ministry of Health
Government Communications and Public Engagement
(250) 952-1889
Cell: (250) 413-7121
Ryan.Jabs@gov.bc.ca

Taylor, Coral L HLTH:EX

From: Cramb, Lorrie HLTH:EX
Sent: Monday, September 8, 2014 5:16 PM
To: Jabs, Ryan GCPE:EX; Forster-Coull, Lisa HLTH:EX; Herman, Matt HLTH:EX; Paton, Arlene HLTH:EX
Cc: Lindstein, Sarah GCPE:EX; McKellar, Lisa HLTH:EX
Subject: RE: HSF Sugar Position Statement Announcement Sept 9

Hi Ryan- here is what I have so far...

s.13

Thanks, Lorrie
Lorrie Cramb, MEd, RD
A/Provincial Nutritionist
Healthy Living Branch, Population and Public Health
BC Ministry of Health
1515 Blanshard St, Victoria, BC V8W 3C8
Phone: (250) 952-1124
Cell: (250) 507-0256

From: Jabs, Ryan GCPE:EX
Sent: Monday, September 8, 2014 3:49 PM
To: Cramb, Lorrie HLTH:EX; Forster-Coull, Lisa HLTH:EX; Herman, Matt HLTH:EX; Paton, Arlene HLTH:EX
Cc: Lindstein, Sarah GCPE:EX
Subject: FW: HSF Sugar Position Statement Announcement Sept 9
Importance: High

Hi,

Could you let us know our position on each of the HSF's recommendations for provinces? ^{s.13}
s.13

Ryan Jabs
Director of Communications - Ministry of Health
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(250) 952-1889
Cell: (250) 413-7121
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From: Mary Stambulic [<mailto:MStambulic@hsf.bc.ca>]
Sent: Monday, September 8, 2014 2:34 PM
To: Herman, Matt HLTH:EX; Forster-Coull, Lisa HLTH:EX; Cramb, Lorrie HLTH:EX; Jabs, Ryan GCPE:EX

Cc: Mark Collison; Erika Callowhill

Subject: HSF Sugar Position Statement Announcement Sept 9

Good afternoon all,

I am sending you this note and attachments to give you the heads up that the Heart and Stroke Foundation will be releasing its national position statement on sugar **tomorrow**. We believe that media may be interested in this and expect some uptake. Please note that the release, backgrounder and position statements are **embargoed** until tomorrow's release.

Attached are the following documents:

- Release – **under embargo until Sept 9**
- Position statement – **under embargo until Sept 9**
- Backgrounder for Canadians – **under embargo until Sept 9** and will be posted on the website at that time

Should you have any questions, please don't hesitate to contact me and thank you in advance for respecting the embargo.

Kind regards,

Mary

Mary Stambulic

Manager, Advocacy and Stakeholder Relations | BC & Yukon

Heart and Stroke Foundation

DIRECT 250 410 8201 (Victoria) | EXT 8811 | E mstambulic@hsf.bc.ca

heartandstroke.ca

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Stay connected in BC & the Yukon:

FACT SHEET

TAXATION OF UNHEALTHY FOODS

ISSUE

British Columbia is committed to supporting British Columbians to reduce their consumption of unhealthy foods, including sugary drinks, by providing nutrition information and restricting sales of unhealthy foods in schools and public buildings, not through taxation.

KEY FACTS

- The Federal Government taxes unhealthy foods, such as soft drinks, candy and snack foods, through the GST. Basic groceries are zero-rated (not subject to GST).
- All Provinces with a sales tax, except British Columbia and Saskatchewan, apply a tax to unhealthy foods through either the PST or HST.
- No jurisdiction in Canada has an additional tax on specific foods such as sugary drinks.
- The BC Healthy Living Alliance and others have called on the BC government to introduce a tax on sugary drinks as part of a comprehensive approach to addressing healthy eating and healthy weights in the province. Industry has expressed considerable concern regarding the use of economic disincentives to address public health issues.
- With the transition from the HST to the PST/GST system in BC, unhealthy foods, including sugary drinks, went from having 12 percent HST to having 5 percent GST and no PST.
- s.13
- British Columbia's approach to date has been to work collaboratively with the food industry to support consumers to make informed decisions about the food they eat.
- The Canadian Beverage Association (now Refreshments Canada), in partnership with the BC government, launched its Clear on Calories initiative on February 11, 2011. This initiative provides clear and consistent disclosure of caloric information on the front of packages produced by members and on member controlled vending machines and fountain beverage dispensers.
- Provincial initiatives that support the people to make healthy food choices include:
 - *HealthyFamiliesBC website* provides articles, blogs, videos and recipes focussing on reducing sodium and sugary drinks and increasing fruits and vegetables.
 - The *Informed Dining* program works with the restaurant sector to provide full nutrition information of standard menu items to consumers at the point of ordering.
 - The *Guidelines for Food and Beverage Sales in BC Schools* outlines the minimum nutrition standards that schools are required to apply for all food and beverages sold to students.
 - The *Healthier Choices in Vending Machines in BC Public Buildings Policy* outlines minimum nutrition standards for pre-packaged food sold in vending machines.

FINANCIAL IMPLICATIONS

N/A

Approved by:

Arlene Paton, ADM, Population and Public Health; November 5, 2014

Taylor, Coral L HLTH:EX

From: Paton, Arlene HLTH:EX
Sent: Monday, September 8, 2014 3:23 PM
To: Forster-Coull, Lisa HLTH:EX
Cc: Herman, Matt HLTH:EX
Subject: RE: PST on Junk Food s.13

s.13

Regards,

Arlene Paton
Assistant Deputy Minister
Population and Public Health
Ministry of Health
Tel: 250-952-1731

From: Forster-Coull, Lisa HLTH:EX
Sent: Monday, September 8, 2014 1:52 PM
To: Paton, Arlene HLTH:EX
Cc: Herman, Matt HLTH:EX; Forster-Coull, Lisa HLTH:EX
Subject: FW: PST on Junk Food s.13

s.13

From: Foy, Anne FIN:EX
Sent: Monday, September 8, 2014 9:05 AM
To: Forster-Coull, Lisa HLTH:EX; Cramb, Lorrie HLTH:EX
Subject: RE: PST on Junk Food s.13

s.13

s.13

Manitoba taxes prepared foods generally following the GST rules:

<http://www.gov.mb.ca/finance/taxation/bulletins/029.pdf>

Because the PST currently exempts all food for human consumption, I have no data on foods sales in restaurants or in retail – you can contact BC stats for this data.

s.13

Anne Foy
Strategic Advisor
Tax Policy Branch
Ministry of Finance

-----Original Appointment-----

From: Forster-Coull, Lisa HLTH:EX

Sent: Tuesday, September 2, 2014 12:39 PM

To: Foy, Anne FIN:EX; Cramb, Lorrie HLTH:EX

Subject: PST on Junk Food s.13

When: Monday, September 22, 2014 3:30 PM-4:30 PM (UTC-08:00) Pacific Time (US & Canada).

Where: Anne Foy's office

Hello Anne. s.13

s.13

s.13

Thanks so much. I look forward to meeting with you. Lisa

Taylor, Coral L HLTH:EX

From: DMOFFICE, HLTH HLTH:EX
Sent: Wednesday, December 17, 2014 2:18 PM
To: Health, HLTH HLTH:EX
Subject: FW: [CSPI] Support for Montreal City Council motion calling for provincial tax on sugar-sweetened beverages

DM - FYI to PPH please

-----Original Message-----

From: CSPI [<mailto:cspi-bounces@list.web.net>] On Behalf Of cspi@list.web.net
Sent: Tuesday, December 16, 2014 7:42 AM
To: CSPi@list.web.net
Subject: [CSPI] Support for Montreal City Council motion calling for provincial tax on sugar-sweetened beverages

Yesterday, I sent a letter of support to Montreal City Councillor Marvin Rotrand for a motion he is advancing to a vote today. See:

http://cspinet.org/canada/pdf/cspi_councilor-rottrand.ssb-tax.dec15-2014.pdf

In 2009, the Quebec Liberal Party, of which Mayor Denis Coderre is a member, unanimously recommended that the Government of Quebec implement a new tax on soft drinks (as well as energy drinks, chips, and candy).

According to Coalition Poids--a leading Quebec consumer health group and project of the Quebec Public Health Association--a poll taken the same year showed that 77% of Quebec residents supported a tax on junk food, and even more did in 2012 if revenue were to be used to support prevention.

Montreal City Council would do well to support Councillor Rotrand's motion or bring forth sensible, stronger language that would achieve the same or better results. With Medicare costs soaring, keeping sugar-sweetened beverages cheap in relation to healthful foods and beverages doesn't make sense for public health, a healthy workforce, or public finances.

Yielding to pressure from purveyors of liquid candy should not be an option. Voters and children of Montreal and all Quebecers deserve better.

-Bill Jeffery

Bill Jeffery, LLB, National Coordinator
Centre for Science in the Public Interest (CSPI) One Rideau St, Suite 740 Ottawa, Ontario K1N 8S7 Canada
Tel: 613-244-7337/613-244-7337 (ext. 1)
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Twitter: @BillJefferyCSPI
<http://www.cspinet.ca>

CSPI is an independent health advocacy organization with offices in Ottawa and Washington. CSPI's advocacy efforts are supported by more than 100,000 subscribers to the Canadian edition of its Nutrition Action Healthletter, on average,

one subscribing household within a one block radius of every Canadian street corner. CSPI does not accept industry or government funding and Nutrition Action does not carry advertisements.

To subscribe/unsubscribe to CSPI's action-alert listserv, visit:
<http://list.web.net/lists/listinfo/cspi>

CSPI mailing list
CSPI@list.web.net
<http://list.web.net/lists/listinfo/cspi>

Taylor, Coral L HLTH:EX

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<http://list.web.net/lists/listinfo/cspi>

Taylor, Coral L HLTH:EX

From: HLTH PPH Documents Processing HLTH:EX
Sent: Tuesday, March 3, 2015 11:01 AM
To: Nisbet, Corinna HLTH:EX
Subject: FW: 1029161 - MLA Peter Fassbender Mtg (TBD) with CCS re Tobacco Control and our Advocacy
Attachments: PeterFassbender_MLA_Mtg2015.pdf; FLAVTobacc_Postcard_7x5.pdf; 1029161 - MLA Fassbender Mtg with CCS re Tobacco Control and tax on sugar beverages.docx

FYI- Please save to you LAN as final. Thank you.

Natalie Sitar

A/Administrative and FOI Coordinator
Office of the Assistant Deputy Minister
Population and Public Health | Ministry of Health | Phone: 250-952-1803

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From: Docs Processing HLTH:EX
Sent: Tuesday, March 3, 2015 9:36 AM
To: O'Brien, Kellie HLTH:EX
Cc: Docs Processing HLTH:EX; Foran, Grace E HLTH:EX; Casanova, Tamara HLTH:EX; O'Callaghan, Jacqueline HLTH:EX; Andrachuk, Andrea HLTH:EX; Stearn, Anne HLTH:EX; Marsh, Jania HLTH:EX
Subject: 1029161 - MLA Peter Fassbender Mtg (TBD) with CCS re Tobacco Control and our Advocacy

Hi Kellie:

Attached is information requested below, and has been provided by PPH, approved by Arlene Paton, ADM and reviewed by Grace Foran.

Also, the information provided could be shared with other ministers who may agree to meet with the CCS on these topics.

Thanks so much,

Kathy Simonson
Program Coordinator / Documents Processing Unit / Deputy Minister's Office / Ministry of Health
5-2 1515 Blanshard St, Victoria BC V8W 3C8
Telephone 250 952-1811

kathy.simonson@gov.bc.ca

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From: O'Brien, Kellie HLTH:EX
Sent: Tuesday, February 17, 2015 12:43 PM
To: Casanova, Tamara HLTH:EX
Subject: FW: request to meet to discuss Tobacco Control and our Advocacy

Hi Tamara,

Can staff please prepare materials for Minister Fassbender. He plans to meet with the Canadian Cancer Society before March 20th but there is no firm date as of yet.

Additionally, this looks like it may be a generic request going to ALL government MLAs. If this is the case, it may be best for staff to prepare one set of materials that I can share widely.

Thanks
Kellie

Kellie O'Brien

Executive Assistant to the Hon. Terry Lake
Minister of Health, Province of BC
D: 250-953-3547
C: 250-896-0685

From: Comrie, Brittany [<mailto:Brittany.Comrie@leg.bc.ca>]
Sent: Tuesday, February 17, 2015 12:28 PM
To: O'Brien, Kellie HLTH:EX
Cc: Gaisford, Carmen J LASS:EX
Subject: FW: request to meet to discuss Tobacco Control and our Advocacy

Hi Kellie,

We have received this meeting request from the Canadian Cancer Society – we are going to go ahead and start working on times for the meeting, but in the meantime, if you can check if there is any information that we should provide to the Minister before it we would appreciate it!

It would not be before Friday, March 20.

Thanks!
Brittany

From: Ann Marie Walsh [<mailto:awalsh@bc.cancer.ca>]
Sent: February 17, 2015 12:17 PM
To: Fassbender.MLA, Peter
Cc: Ann Marie Walsh
Subject: request to meet to discuss Tobacco Control and our Advocacy

Hi Peter

I spoke with your constituency office earlier today to request a date/time to meet with you to discuss a few issues related to our Advocacy work.
Attached for your reference and review is a copy of the document I will be speaking too; in addition I have also attached some graphics.

I look forward to hearing back from you and welcome the opportunity to meet to talk about this important health issue.

Cheers,
Ann

Ann Marie Walsh BA/M.ED
Team Lead, Health Promotion
Canadian Cancer Society, BC and Yukon Division

Tel 604-533-1668 ext. 317 Fax 604-533-1835
Mobile 604-802-6783
#202-20434-64th Avenue
Langley, BC V2Y 1N4

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MEETING MATERIAL

Cliff #: 1029161

PREPARED FOR: Honourable Peter Fassbender, Minister of Education

TITLE: Meeting between Minister Fassbender and Ms. Ann Marie Walsh, Team Lead, Health Promotion, Canadian Cancer Society, BC and Yukon, Division (Meeting date and location is to be confirmed, but will be on or after March 20, 2015)

MEETING REQUEST/ISSUE: Ms. Ann Marie Walsh of the Canadian Cancer Society (CCS) has requested a meeting to brief the Minister on its policy positions s.13
s.13

SHOULD MINISTRY STAFF ATTEND THIS MEETING: No

BACKGROUND:

The CCS is a strong advocate for tobacco control and healthy eating strategies, as tobacco use and unhealthy eating are common risk factors for some preventable cancers. The CCS has received funding from the Province for cancer prevention work, and is currently delivering a workplace health initiative, WellnessFits, in partnership with the Province. It is understood that the CCS will be seeking similar meetings with other government members.

ADVICE:

NR,s.13,s.17

Tobacco Control:

NR,s.13,s.17

Sugar Sweetened beverages:

The CCS requests the Province support healthy eating s.13
s.13 as part of a comprehensive healthy eating strategy.

Recommended response:

The Ministry of Health (the Ministry) promotes healthy eating and addresses childhood obesity through a range provincial policies and programs that create healthy environments that encourage healthy choices, including reducing the consumption of sweetened beverages. These include:

- Financial support for the development of the educational program Sip Smart! BC. This classroom learning module is for Grades 4, 5 and 6 and is currently implemented in 557 schools and health programs. It is led by the Heart and Stroke Foundation of Canada (BC & Yukon) and the BC Paediatric Society.
- Since 2008, established a mandated policy for all schools that restricts the sale of sweetened beverages for all schools. The *Guidelines for Food and Beverage Sales in BC Schools* was updated in 2013, in partnership with the Ministry of Education. The Guidelines restrict the sale of all sweetened beverages, including juice and milk-based beverages that exceed limits on portion sizes, sugar and calories per serving. The revisions incorporate the most up-to-date nutrition knowledge and the current marketplace.
- Since 2006, set a mandated policy that restricts the sale of sweetened beverages in all BC public buildings, including health authorities, post-secondary institutions and crown corporations. These guidelines align with the 2013 school guidelines.
- In 2011, partnered with the Canadian Beverage Association to launch its Clear on Calories initiative. The goal is to provide clear and consistent disclosure of caloric information on the front of packages produced by members and on member-controlled vending machines and fountain beverage dispensers.
- In 2012, BC provided a grant to Dietitians of Canada to develop consistent key messages on sugary drink reduction which are now used on the Healthy Families BC website (www.healthyfamiliesBC.ca), in the Fact-Sheet Generator(<https://bcfsg.healthlinkbc.ca/>) a specialized web-based tool that allows health professionals to customize their own nutrition factsheets with standardized, evidence-based key messages and supporting messages),and in other educational materials and settings.

APPROVED BY: Arlene Paton, ADM, Population and Public Health

DATE APPROVED: February 27, 2015



Canadian Cancer Society
Société canadienne du cancer

A Presentation to the BC Government

To: the Honourable, Peter Fassbender Minister of Education

Care of electronic mail to: peter.fassbender.mla@leg.bc.ca

by the Canadian Cancer Society, BC & Yukon

February 17, 2015

Summary of Recommendations

The Canadian Cancer Society, BC and Yukon, is pleased to provide the BC government with our recommendations to improve the health outcomes of British Columbians, thereby helping to maintain a sustainable health care system. We very much appreciate the support that members of the BC government give to the Canadian Cancer Society in their communities.

The Canadian Cancer Society is a national, community-based organization of volunteers whose mission is to eradicate cancer and enhance the quality of life of people living with cancer. Thanks to our donors and volunteers, the Society has the most impact, against the most cancers, in the most communities in Canada. We do this by fighting all cancers on multiple fronts – through prevention, advocacy, research and supporting those living with cancer.

Summary of Recommendations to Improve Health Outcomes

1. Support Comprehensive Tobacco Control Legislation by:
 - a. increasing tobacco taxes by up to \$2.20 per carton to a total of \$50.00/carton
 - b. prohibiting smoking in outdoor public places, such as restaurant/bar patios, parks and playgrounds
 - c. regulating e-cigarettes and prohibiting their sale to children if the federal government does not
2. Implement a tax on sugar-sweetened beverages



Canadian Cancer Society
Société canadienne du cancer

Recommendations to Improve Health Outcomes

Background

Cancer is the leading cause of death in BC. Statistics tell us that two out every five of us will be diagnosed with cancer in our lifetime, and one out of every four of us will die of this disease. Yet, about half of all cancers can be prevented through healthy living and policies that protect the health of British Columbians.

Imagine then if half the people who are expected to get cancer this year, didn't. In British Columbia that would be more than 12,000 people and in Canada more than 95,000 people. We believe that preventing half of all cancers is within our grasp, and we have a vision to stop cancer before it starts.

Prevention is a significant priority for the Canadian Cancer Society. There will be a 70% increase in cancers in the next 20 years unless we change, due to the growth and especially the aging of the population.

BC generally has the healthiest population in Canada. However, there are still over 550,000 British Columbians who smoke and over one million who are overweight or obese (<http://www.health.gov.bc.ca/library/publications/year/2014/Setting-priorities-BC-Health-Feb14.pdf>).

Further, one in three British Columbians is living with one or more diagnosed chronic conditions, and 2% of the population is living with four to six chronic conditions. Chronic diseases represent the largest health burden in BC, now and in the foreseeable future (<http://www.health.gov.bc.ca/library/publications/year/2013/BC-guiding-framework-for-public-health.pdf>).

With current health care spending at over 37% of the provincial budget, and with the daunting projections for the future, it is clear that measures must be taken to bend the health care cost curve.

1. Support Comprehensive Tobacco Control Legislation

The single most important thing you can do to reduce your risk of cancer is to live smoke-free.¹

Tobacco use is still the leading cause of preventable death in British Columbia. It is responsible for 30% of cancer deaths, and 85% of lung cancers.

¹ Canadian Cancer Society, Smoking and Cancer <http://www.cancer.ca/en/prevention-and-screening/live-well/smoking-and-tobacco/smoking-and-cancer/?region=on>.



We also have a vision to reduce BC's smoking rates from 13%² - which has largely been our plateau since 2007 - to 9% by 2020. We ask that the BC government support the following tobacco control measures, which we believe will help prevent youth and young adults from starting to smoke, and help people to quit.

(a) Increase tobacco taxes

The Canadian Cancer Society, BC and Yukon, applauded the BC government for implementing a tobacco tax increase of \$3.20 per carton of 200 cigarettes, effective April 2014. At this time, we recommend that the BC government further increase tobacco taxes up to \$2.20 per carton of 200 cigarettes, to a total tobacco tax of \$50.00 per carton of 200 cigarettes.

Higher tobacco taxes can have a tremendous impact in reducing tobacco use, while at the same time increasing government revenue. BC can increase tobacco taxes without risk of a material increase in tobacco contraband for the following reasons:

- Other Western provinces have sustained much higher tobacco taxes than BC without material contraband
- Contraband in Canada is not due to higher tobacco taxes, but rather proximity to illegal factories in/near central Canada
- BC has very good controls related to tax-exempt tobacco and First Nations reserves
- Tobacco manufacturers have reduced prices by \$20 or more per carton, which increases the room for provinces to increase tobacco taxes

Higher tobacco taxes are an extremely effective way to reduce smoking, especially among youth who are particularly price-sensitive. Most studies conclude that a 10% increase in the price of a package of cigarettes reduces overall cigarette consumption by 3 to 5%. This measure would help to reduce tobacco use and save lives, and public opinion polls show this is popular public policy. The Finance Minister also recognized, in BC Budget 2014, that "there has been a significant amount of economic analysis that concludes increased tobacco prices are an effective tool in reducing smoking"

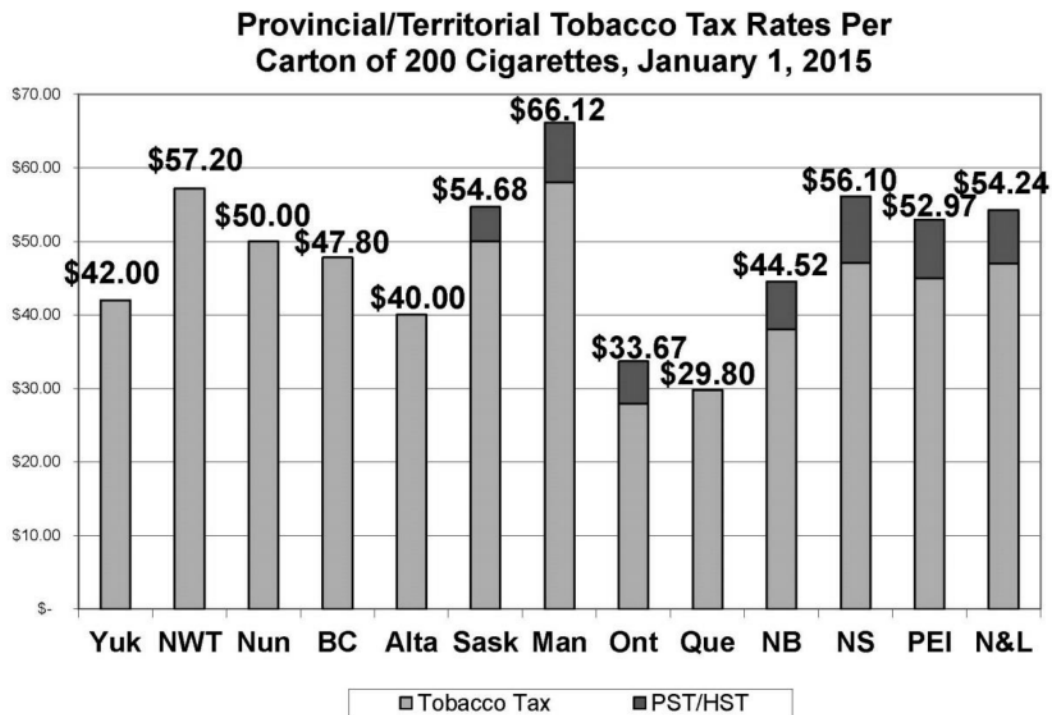
(http://www.bcbudget.gov.bc.ca/2014/bfp/2014_Budget_Fiscal_Plan.pdf, at pg 42).

In the fiscal year 2012 -13, the BC government collected \$614 million in revenue from tobacco taxes alone (see: Physicians for a Smoke-Free Canada, *Tax Revenues from Tobacco Sales*, November 2013).

² Canadian Tobacco Use Monitoring Survey, Statistics Canada, 2012, age 15+ <http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/research-recherche/stat/index-eng.php>



BC has lower tobacco tax rates than some other provinces, including Saskatchewan and Manitoba, as illustrated by the following graph.



We recommend that the BC government increase tobacco taxes up to \$2.20 per carton of 200 cigarettes. A portion of this increase in revenue could enhance the provincial tobacco control strategy. A tobacco tax increase would result in decreased smoking rates, especially among young people.

(b) Ban smoking in outdoor public places including restaurant and bar patios, as well as parks, playgrounds and beaches

There is no safe level of second-hand smoke. Second-hand smoke is responsible for up to 140 deaths per year in British Columbia.



Creating smoke-free outdoor places not only protects the public and workers from exposure to second-hand smoke but also reduces the exposure of youth to adult smoking so that they are less likely to view it as normal behavior. And with BC's new liquor policies permitting minors in certain pubs and legions, it is even more important to prohibit smoking on restaurant and bar patios (http://www2.gov.bc.ca/local/haveyoursay/Docs/liquor_policy_review_report.pdf).

Smoking bans have also been shown to increase the motivation of smokers to quit and cut back. Prohibiting smoking in outdoor places help prevent youth from starting to smoke, and will help to decrease BC's smoking rates. Indeed, the Ontario government recently introduced the *Youth Smoking Prevention Act*, which, among other things, would:

- prohibit smoking on playgrounds, sport fields, and bar and restaurant patios
- ban the sale of flavoured tobacco products targeted at kids to make smoking less appealing to young people

As the Ontario Ministry of Health and Long Term Care said in its recent press release, "prevent[ing] youth from starting to use tobacco and protecting them from the harmful effects of second hand smoke, will help to achieve the [Ontario] government's Action Plan for Health Care goal to have the lowest smoking rate in the country" (<http://news.ontario.ca/mohltc/en/2013/11/government-introduces-legislation-to-protect-youth-from-harmful-effects-of-tobacco.html>).

Smoke-free bylaws do not negatively impact business. Virtually every objective, peer-reviewed study using official sales tax data, demonstrates that smoke-free bylaws and legislation have no adverse impact on restaurant, bar, hotel and tourism receipts and may even be good for business.

We ask that the BC government prohibit smoking in outdoor public places, such as restaurant/bar patios, parks and playgrounds.

(c) Regulate e-cigarettes and prohibit their sale to children if the federal government does not

Electronic cigarettes (e-cigarettes) are battery operated devices that mimic the use and sometimes the appearance and taste of conventional cigarettes. Health organizations have identified a number of concerns about e-cigarette use, including their safety, impact on youth smoking initiation, and potential to normalize smoking behaviour and undermine existing tobacco control legislation.

For example, e-cigarettes can contain products that are toxic and known irritants, and there is not enough scientific evidence to substantiate that e-cigarettes are an effective cessation aid.



E-cigarettes have been promoted by some manufacturers as products which can be used anywhere and as a way to avoid public smoking bans. Many health organizations are concerned that a powerful deterrent to tobacco use will be lost as youth, people who have quit or who are struggling to quit will be enticed to try them. This could support more regular nicotine use and lead to renormalization.

On September 26, 2014, delegates at the Union of BC Municipalities Convention adopted a resolution calling on the BC government to regulate the use and sale of e-cigarettes. Health Minister Terry Lake responded by saying that he would prefer that the federal government regulate e-cigarettes, but that the BC government is prepared to act within a year if Ottawa does not (<http://www.albernivalleynews.com/news/277517221.html>). "We encourage the federal government to put a framework in place to protect particularly young people from electronic cigarettes and make sure they are regulated in the way that tobacco is regulated," Health Minister Terry Lake said (<http://globalnews.ca/news/1589533/ministers-want-federal-action-on-flavoured-tobacco/>).

In Canada, the provinces of Nova Scotia and Ontario as well as (at least) 9 municipalities have adopted laws to prohibit the sale of electronic cigarettes to minors and the use of electronic cigarettes in places where smoking is banned by law.

As such, the Canadian Cancer Society recommends that the BC government regulate the use and sale of e-cigarettes, within a year, if the Federal government does not. This action will help prevent youth from starting to use e-cigarettes and help prevent renormalization of smoking, which could undermine smoking cessation efforts.

We are asking the BC government to regulate e-cigarettes, if the federal government does not, in the following ways:

- Prohibit e-cigarette sales to minors, and ban the use of e-cigarettes on elementary and secondary school property. In the US, many states have prohibited the sale of e-cigarettes to minors, including California, Hawaii, Idaho, New Jersey, New York, Tennessee, Utah, and Wisconsin. France and the UK also have such a measure.
- Prohibit the use of e-cigarettes in workplaces and public places where smoking is banned by law. Such a measure has been implemented in an increasing number of jurisdictions, including the American states of New Jersey, North Dakota and Utah, as well as Boston, Chicago, Indianapolis, Los Angeles, New York, and many other US municipalities. The city of Vancouver recently amended their bylaw to include e-cigarettes.
- Strictly regulate e-cigarette advertising and promotion. In the US, where e-cigarettes with nicotine are legally sold, there is considerable advertising of e-cigarettes as a product that can be used where smoking is prohibited. This is concerning because e-cigarettes are being marketed as an alternative to not smoking, rather than as an



alternative to smoking. In the US, there is also considerable promotion of e-cigarettes through lifestyle advertising, which sometimes includes celebrities.

- Prohibit e-cigarette sales in locations where tobacco sales are banned, and have other controls on where e-cigarettes may be sold.
- Have regulatory ability over the product, including the ability to regulate flavours and to require that e-cigarettes appear to be visually distinct from regular cigarettes.

2. Implement a Tax on Sugar-Sweetened Beverages

We recommend that the BC government implement a tax in the amount of \$0.01/ounce on sugar-sweetened beverages, as part of a comprehensive healthy eating strategy.

About one-third of all cancers can be prevented by eating well, being active and maintaining a healthy body weight³, yet "[o]verweight and obesity ... is the second highest preventable, contributing cause of death in BC after tobacco use" (<http://www.health.gov.bc.ca/library/publications/year/2014/healthy-families-bc-policy-framework.pdf>, at pg 12). According to Dr. Carolyn Gotay, Director of the CPC, "*more Canadians are obese than ever before – on average, between one fourth and one third of Canadians are obese, depending on the region*".⁴

Sugar-sweetened beverages are the single largest contributor of sugar in the diet.⁵ And, the consumption of sugar-sweetened beverages has been linked to weight gain and higher body mass index in children and youth.⁶ Calories derived from soft drinks are of particular concern as people seldom compensate for their consumption of high calorie liquids by decreasing their

³ Food, Nutrition, Physical Activity and the Prevention of Cancer: A Global Perspective, AICR 2007.

⁴ Gloria Tsang, 'UBC Researchers Create New Obesity Maps for Canada', Healthcastle Vancouver, May 13, 2013, Accessed on May 24, 2014: <http://vancouver.healthcastle.com/ubc-researchers-create-new-obesity-maps-canada>; based on the article: Carolyn C. Gotay, Peter T. Katzmarzyk, Ian Janssen, Marliese Y. Dawson, Khatereh Aminoltehari, Nicci L. Bartley, 'Updating the Canadian Obesity Maps: An Epidemic in Progress', *Canadian Journal of Public Health* (2013), 104.

⁵ Yang Q, Zhang Z, Gregg WE, Flanders WD, Merritt R, Hu FB. Added sugar intake and cardiovascular diseases mortality among US adults. *JAMA Internal Medicine* Published online February 3, 2014.

⁶ Garriguet D. Beverage consumption in children and teens. Health Reports. 2008;19(4). Available from: <http://www.statcan.gc.ca/pub/82-003-x/2008004/article/6500820-eng.pdf>.



intake of solid foods.⁷ Reducing sugar-sweetened beverage consumption has been termed the single best opportunity to prevent overweight and obesity in adults.⁸

Economic levers such as tax measures have been recommended by the World Health Organization, and others, as government interventions that can help British Columbians make healthier choices regarding foods. The Canadian Cancer Society also believes that tax measures, such as increasing tobacco taxes and implementing a sugar-sweetened beverage tax, can be health-promoting and should be a consideration in developing provincial tax policies. And similar to tobacco taxes, sugar-sweetened beverage tax revenue could be used to fund health promotion initiatives, such as subsidizing vegetables and fruit to make healthy eating more affordable.

Implementing a sugar-sweetened beverage tax is a measure that is supported by the Heart and Stroke Foundation

(http://www.heartandstroke.com/site/c.ikIQLcMWJtE/b.9201361/k.47CB/Sugar_heart_disease_and_stroke.htm), as well as the Childhood Obesity Foundation (<http://www.childhoodobesityfoundation.ca/admin/files/files/013withlogomarch11withreferencesfinal.pdf>).

Jurisdictions including Mexico, France, as well as regions in the U.S. and Europe, have mandated a tax on sugar-sweetened beverages as a means to deter consumption and generate revenues for health promotion initiatives and/or subsidies for healthy foods such as fruits and vegetables. Studies have shown that consumption of sugar-sweetened beverages decreased with the introduction of a tax on sugar-sweetened beverages.⁹

As such, the Canadian Cancer Society recommends that the BC government implement a tax on sugar-sweetened beverages in the amount of \$0.01/ounce. This measure will help influence healthy lifestyle choices, including reducing the consumption of sugar-sweetened beverages and helping to reduce overweight and obesity in British Columbia.

Conclusion

We would like to thank the BC government for considering our recommendations for a healthier BC, and for all of the hard work that government is doing to improve the health and well-being of

⁷ DiMeglio DP, Mattes RD. (2000). Liquid versus solid carbohydrate: effects on food intake and body weight. *International Journal of Obesity*. 24, 794-800

⁸ Apovian CM (2004). *JAMA* 292:979.

⁹ Block JP, Chandra A, McManus KD, Willett WC. Point of purchase price and education intervention to reduce consumption of sugary soft drinks. *Am J Public Health*. August 2010, Vol 100, No. 8 | *American Journal of Public Health* 1427-1433; Gustavsen G. Public Policies and the Demand for Carbonated Soft Drinks: A Censored Quantile Regression Approach. 2005 International Congress, August 23-27, 2005, Copenhagen, Denmark. European Association of Agricultural Economists



Canadian Cancer
Society

Société
canadienne
du cancer

British Columbians. We congratulate your recent announcement of a smoke-free Winter Games and commitment to continue reducing the rates of tobacco use in our province.

The Canadian Cancer Society knows full well that British Columbians are facing significant economic challenges, but that our elected officials are committed to protecting vital services and building a stronger British Columbia. We believe that these recommendations will provide additional revenue to the BC government, while also improving the health outcomes of British Columbians.

Taylor, Coral L HLTH:EX

From: Cramb, Lorrie HLTH:EX
Sent: Thursday, April 2, 2015 4:46 PM
To: Paton, Arlene HLTH:EX
Cc: Herman, Matt HLTH:EX; Bocskei, Elietha HLTH:EX; Cramb, Lorrie HLTH:EX
Subject: Healthy Eating Strategy Draft #1
Attachments: Ministry-led actions.docx; 2015_04_01HES Report.docx

Hi Arlene

As promised, here is a very early draft of the HES report including a separate attachment for Ministry of Health led actions with budget info and reach. We are still trying to determine best way to incorporate the overarching action plan which was developed by the Leadership Council as there is too much information for a one page visual!

I wanted to at least get this out to you today as a start and will share a more updated version hopefully next week as a more fulsome report.

Hope you have a fantastic Easter weekend!
Cheers, Lorrie

Lorrie Cramb, MEd, RD
Provincial Dietitian
Healthy Living Branch, Population and Public Health BC Ministry of Health PLEASE NOTE NEW ADDRESS - PO Box 9646
STN PROV GOV'T|Victoria BC V8W 9P1
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Page 094 to/à Page 133

Withheld pursuant to/removed as

s.13;s.17

FACT SHEET

HEALTHY EATING - TAXATION OF UNHEALTHY FOODS

ISSUE

British Columbia is committed to supporting British Columbians to reduce their consumption of unhealthy foods, including sugary drinks, by providing nutrition information and restricting sales of unhealthy foods in schools and public buildings, not through taxation.

KEY FACTS

- The Federal Government taxes unhealthy foods, such as soft drinks, candy and snack foods, through the GST. Basic groceries are zero-rated (not subject to GST).
- All Provinces with a sales tax, except British Columbia and Saskatchewan, apply a tax to unhealthy foods through either the PST or HST.
- No jurisdiction in Canada has an additional tax on specific foods such as sugary drinks.
- The BC Healthy Living Alliance and others have called on the BC government to introduce a tax on sugary drinks as part of a comprehensive approach to addressing healthy eating and healthy weights in the province. Industry has expressed considerable concern regarding the use of economic disincentives to address public health issues.
- With the transition from the HST to the PST/GST system in BC, unhealthy foods, including sugary drinks, went from having 12 percent HST to having 5 percent GST and no PST.
- s.13
- British Columbia's approach to date has been to work collaboratively with the food industry to support consumers to make informed decisions about the food they eat.
- The Canadian Beverage Association (now Refreshments Canada), in partnership with the BC government, launched its Clear on Calories initiative on February 11, 2011. This initiative provides clear and consistent disclosure of caloric information on the front of packages produced by members and on member controlled vending machines and fountain beverage dispensers.
- Provincial initiatives that support people to make healthy food choices include:
 - *HealthyFamiliesBC website* provides articles, blogs, videos and recipes focussing on reducing sodium and sugary drinks and increasing fruit and vegetable consumption.
 - The *Informed Dining* program works with the restaurant sector to provide full nutrition information of standard menu items to consumers at the point of ordering.
 - The *Guidelines for Food and Beverage Sales in BC Schools* outlines the minimum nutrition standards that schools are required to apply for all food and beverages sold to students.
 - The *Healthier Choices in Vending Machines in BC Public Buildings Policy* outlines minimum nutrition standards for pre-packaged food sold in vending machines.

FINANCIAL IMPLICATIONS

N/A

Approved by:

Arlene Paton, ADM, Population and Public Health; April 29, 2015

Page 135 to/à Page 148

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Taylor, Coral L HLTH:EX

From: Cramb, Lorrie HLTH:EX
Sent: Tuesday, September 22, 2015 1:47 PM
To: Wren, Anna HLTH:EX
Subject: FW: MEDIA REQUEST - CBC TV Request: Sugar/pop tax - deadline 11:00 a.m.

Anna- can you help out with this? I will give you a call.

From: Herman, Matt HLTH:EX
Sent: Tuesday, September 22, 2015 1:41 PM
To: Heinze, Laura R GCPE:EX; Paton, Arlene HLTH:EX; May, Stephen GCPE:EX; Muller, Bev HLTH:EX
Cc: Brownsey, Silas HLTH:EX; Pennock, Mike HLTH:EX; Cowan, Darynn HLTH:EX; Cramb, Lorrie HLTH:EX
Subject: RE: MEDIA REQUEST - CBC TV Request: Sugar/pop tax - deadline 11:00 a.m.

s.13
s.13 We'll provide more info asap.

Cheers, Matt

From: Heinze, Laura R GCPE:EX
Sent: Tuesday, September 22, 2015 12:58 PM
To: Paton, Arlene HLTH:EX; May, Stephen GCPE:EX; Muller, Bev HLTH:EX; Herman, Matt HLTH:EX
Cc: Brownsey, Silas HLTH:EX; Pennock, Mike HLTH:EX; Cowan, Darynn HLTH:EX
Subject: RE: MEDIA REQUEST - CBC TV Request: Sugar/pop tax - deadline 11:00 a.m.

Hi again folks,

s.13 ... can
you advise?

Thx!
Laura

From: Paton, Arlene HLTH:EX
Sent: Tuesday, September 22, 2015 8:52 AM
To: May, Stephen GCPE:EX; Muller, Bev HLTH:EX; Herman, Matt HLTH:EX
Cc: Heinze, Laura R GCPE:EX; Brownsey, Silas HLTH:EX; Pennock, Mike HLTH:EX; Cowan, Darynn HLTH:EX
Subject: RE: MEDIA REQUEST - CBC TV Request: Sugar/pop tax - deadline 11:00 a.m.

Mike, can you provide our numbers asap for Stephen, thanks!

Regards,

Arlene Paton
Assistant Deputy Minister
Population and Public Health
Ministry of Health
PO Box 9646 Stn Prov Govt
Victoria BC V8W 9P1
Tel: 250-952-1731

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From: May, Stephen GCPE:EX
Sent: Tuesday, September 22, 2015 8:40 AM
To: Paton, Arlene HLTH:EX; Muller, Bev HLTH:EX; Herman, Matt HLTH:EX
Cc: Heinze, Laura R GCPE:EX
Subject: FW: MEDIA REQUEST - CBC TV Request: Sugar/pop tax - deadline 11:00 a.m.

Good morning – we’ve had a request from CBC for the diabetes rate in the province and the cost of diabetes to the health care system (the Canadian Diabetes Association is doing its annual call for a sugar tax). Do we have our own numbers on this – as the Canadian Diabetes Association has their own (as noted below).

The Canadian Diabetes Association (who is calling for the tax) – estimated the health care cost for Diabetes in B.C. at \$1.5 billion for 2013 – and that just over 400,000 people in B.C. had diabetes (8.3 percent of the population).

<https://www.diabetes.ca/CDA/media/documents/publications-and-newsletters/advocacy-reports/canada-at-the-tipping-point-british-columbia-english.pdf>

From: Kirk Williams [<mailto:kirk.williams@cbc.ca>]
Sent: Tuesday, September 22, 2015 8:23 AM
To: May, Stephen GCPE:EX
Subject: Re: CBC TV Request: Sugar/pop tax

One further question
What is the diabetes rate in BC and the cost to the health care system?

On Tue, Sep 22, 2015 at 8:09 AM, Kirk Williams <kirk.williams@cbc.ca> wrote:
Just interviewed Dr. Jan Hux. She mentioned she met with BC Government officials yesterday....
K

On Tue, Sep 22, 2015 at 7:51 AM, Kirk Williams <kirk.williams@cbc.ca> wrote:
be

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CBC News Vancouver
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Page 152 to/à Page 191

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- Studies have showed minimal effectiveness of SD taxes between 5 and 9 cents per liter. Taxes at this level are too small to make any significant impact on consumption and behavioural change of individuals as they often go unnoticed (references below)
- There is evidence that a 10% increase in price could reduce consumption by 10 to 13% while at least a 20% increase in price is the amount needed to result in a decline in consumption sufficient to have an effect on health outcomes.

- s.13

Mexico's experience shows taxes on SD's can change behaviours in benefit of public health:

- Mexico's sugary drinks tax passed in 2013 – equivalent to 7 cents (US) per liter – amounts to 10% increase in the price of SD's.
- There was a 6% average reduction in Mexican households during 2014 (reduction increased to 12% by end of year).
- The largest reduction in purchasing was among the lowest socioeconomic group (9% average reduction during 2014; reduction increased to 17% by end of year). This contradicts opponents' arguments that taxation unfairly targets lower socioeconomic groups.
- There was a 4% increase in purchase of untaxed beverages, particularly bottled water

Brownell KD, Farley T, Willett WC, Popkin BM, Chaloupka FJ, et al (2009). The public health and economic benefits of taxing sugar-sweetened beverages. *N Engl J Med.* 361:1599–1605. doi: 10.1056/NEJMp0905723

Mytton O, Rayner M. Health Related Food Taxes and Subsidies, BHF Health Promotion Research Group, University of Oxford. http://www.aomrc.org.uk/doc_view/9578-british-heart-foundation-healthpromotion-research-group-dept-of-public-health-oxford.

Briggs A (2013). Overall and income specific effect on prevalence of overweight and obesity of 20% sugar-sweetened drink tax in UK: econometric and comparative risk assessment modeling study. *BMJ.* 347: f6189. doi: 10.1136/bmj.f6189 PMID: 24179043

Powell LM, Chriqui JF, Khan T, Wada R, and Chaloupka FJ (2013). Assessing the potential effectiveness of food and beverage taxes and subsidies for improving public health: a systematic review of prices, demand and body weight outcomes. *Obesity Rev.* 14:110–128.

Taylor, Coral L HLTH:EX

From: Cramb, Lorrie HLTH:EX
Sent: Tuesday, September 22, 2015 2:02 PM
To: Herman, Matt HLTH:EX; Heinze, Laura R GCPE:EX
Cc: Wren, Anna HLTH:EX; Paton, Arlene HLTH:EX; May, Stephen GCPE:EX; Brownsey, Silas HLTH:EX; Pennock, Mike HLTH:EX; Cowan, Darynn HLTH:EX
Subject: RE: request re sugary drink taxation

s.13

From: Herman, Matt HLTH:EX
Sent: Tuesday, September 22, 2015 1:47 PM
To: Heinze, Laura R GCPE:EX
Cc: Cramb, Lorrie HLTH:EX; Wren, Anna HLTH:EX; Paton, Arlene HLTH:EX; May, Stephen GCPE:EX; Brownsey, Silas HLTH:EX; Pennock, Mike HLTH:EX; Cowan, Darynn HLTH:EX
Subject: FW: request re sugary drink taxation

Hi Laura, please find below and attached info from Lorrie on the sugary drink tax.

From: Cramb, Lorrie HLTH:EX
Sent: Tuesday, September 22, 2015 1:43 PM
To: Herman, Matt HLTH:EX
Cc: Wren, Anna HLTH:EX
Subject: request re sugary drink taxation

- Studies estimate that a 10% increase in the price of sugary drinks would reduce the consumption by 8 to 12.6% , . However, the effects of a price increase could be higher for heavy users of sugary drinks “.
- In a recent intervention, increasing the price of sugary drinks by 35% resulted in a 26% decrease in sales. Sales decreased by an additional 18% when coupled with an educational campaign about the positive health impact of reducing sugar consumption .