Federal government food policy committees and the financial interests of

the food sector

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Chronic non-communicable diseases (NCDs), and cancer and cardiovascular disease in particular, are major causes of death and disability. The widespread consumption of unhealthy food, physical inactivity, the use of tobacco products, and excessive alcohol consumption are the major causes of NCDs. The recent Global Burden of Disease study indicates that diet is the leading risk for both death and disability in Canada and globally(Institute of Metrics and Evaluation, Seattle, United States, http://www.healthmetricsandevaluation.org/gbd/visualizations/gbd-arrow-diagram, accessed May 28 2013). Given the global burden of disease and threat to the economy, the World Health Organization recommends public health policies to facilitate the creation of environments that support healthy dietary choices (1).

While several countries are implementing substantial regulatory reforms and closely monitoring the safety and health of their food supply and industry compliance with policies, Canada is not. The Federal government's approach to healthy food policy is largely based on food industry volunteerism.

With more than \$100 billion in annual sales, the food sector comprises one of the largest industries in Canada (Agriculture and Agri-Food Canada, Ottawa Canada, <a href="http://www.agr.gc.ca/eng/industry-markets-and-trade/statistics-and-market-information/by-product-sector/processed-food-and-beverages/significance-of-the-food-and-beverage-processing-industry-in-canada/?id=1174563085690 accessed August 8, 2013). Researchers and advocates of healthy food policies have voiced concerns that the financial interests of the food sector may be constraining government's ability to develop and maintain healthy food policies (2-4). Table 1

outlines some of the recent concerns that have been expressed in both the lay press and in scientific journals. The global Conflict of Interest Coalition/Network was formed in 2011 to advocate for safeguards against conflict of interest in the public policy development process, particularly in regards to the United Nations Political Declaration on the Prevention and Control of Noncommunicable Diseases and the World Health Organization Global Action Plan on NCDs. The World Health Organization has stressed the importance of reinforcing conflict of interest safeguards in its own policy and program development process.¹

We examined, through Health Canada websites, the extent to which individuals and organizations with financial interests in the food sector are represented on Canadian federal government national food policy committees (Table 2). Of the nine committees identified, the Expert Advisory Group on National Nutrition Pregnancy Guidelines, and the Health Products and Food Branch Advisory Committee websites did not provide sufficient information to enable these committees to be evaluated. Two of the remaining 7 committees (Natural Health Products Program Advisory Committee and the Food Guide Advisory Committee) do not provide public information on the financial interest of their members (Table 3). Of the remaining 5 committees, members with reported direct or indirect financial interests in the food sector ranged from 38% to 77%, with 3 committees reporting memberships with financial interests at 50% or higher (Table 3). Membership with direct financial interests in the food industry was reported as greater than 30% in 3 committees, and 23% and 7% respectively in the remaining committees. Five committees do not

¹ For instance, World health Assembly Resolution 65.6 action 3(3) mandated the World Health Organization "to develop risk assessment, disclosure and management tools to safeguard against possible conflicts of interest in policy development and implementation of programmes consistent with WHO's overall policy and practice."

have publicly available minutes so as to allow for the potential impact of these financial interests to be assessed.

Although specific information on financial interests is not universally available, the committees that provide the federal government with advice on food policy include members with direct and indirect financial interest in the food industry. In addition, for many committees, we were unable to locate documented policies and procedures to provide us with clear guidance on how commercial biases may have been minimized during the development of policy recommendations (e.g. precluding members with financial interest from having input, vetos, votes on policies where they have commercial interest). In general, committee minutes are not available to the public, making it difficult to determine the manner and extent to which commercial bias affected policy advice. However, the strong presence of commercial interests, the lack of formal safeguards to preclude commercially selfserving influences on policy formation, and the lack of transparent public documentation with respect to the decision-making processes of these committees is indicative of an environment where commercial interests may negatively impact national public health food policy recommendations.

The use of independent external advisors can increase the rigor, credibility, and accountability of decisions made by Health Canada. However, these collaborations and consultations, designed to seek and incorporate scientific input into decision-making processes, must be managed in a consistent and transparent way to ensure that the public can trust that financial interests are being not be afforded privileged

opportunities to steer public policies and programs in their favor. The influence that the private sector has on the implementation of policies that support continued or increased profits and commercial growth has already been demonstrated within the realm of medical research, where industry-funded studies are more likely to publish positive results (5). The quality and integrity of decisions made by government agencies that regulate food and nutrition are no less vulnerable to compromise if they give industry a privileged role. In medicine managing conflict of interest remains a significant challenge and the subject of much debate especially in relation to pharmaceutical treatments (6).

Increasing reliance of governments on the support and input of industry in partnerships related to public health seems to have created an environment rich with conflicts of interest (7). Governments, therefore, must carefully examine how large food corporations and their trade associations contribute to NCD prevalence through the promotion of products that undermine health in the way that tobacco companies have long been acknowledged to do, and evaluate their current role in influencing public policy (7).

Our analysis is limited to information available on the federal government websites.

Committee members are required to sign confidentiality agreements precluding their disclosing observations of financial interests that might impact policy advice.

We have not assessed food-industry influences that can occur during meetings with politicians. Notably, federal politicians have spoken out on the importance of efforts

to reduce dietary sodium. That said, a 147-122 vote in the Parliament on May 8, 2013 defeated a bill to mandate the recommendations of the Sodium Working Group that were unanimously agreed to by commercial, academic, civil society, and federal and provincial government representatives. The bill was defeated by 146 Conservative government MPs despite extensive support from civil society (approximately 70 groups representing residents in nearly two-thirds of Canadian households and health professionals that treat virtually all Canadians²) and the Canadian public (about 80% support in multiple national surveys). In addition, following public disclosure that the information provided by industry on food labels is not accurate, the federal government announced that it would no longer monitor the accuracy of labeling, but would, rather, rely on the public to detect and report inaccuracies in food labeling to food companies.

Our investigation is a small step towards examining the issue of financial interests and food policy in Canada. Further research is needed examining the ways in which financial interests may influence food policy in Canada. Research could also focus on the extent to which the Canadian food industry sponsors research and the outcomes of the research; funds non-government organizations; funds political lobby groups; funds, and meets with policy makers. The financial interests of elected officials prior to, during and following their elected tenure should also be considered

Government of Canada conflict of interest procedures and processes must be made transparent and accessible to all Canadians (8). Further, it is important for the

² See joint Statement of NGOs: http://cspinet.org/canada/pdf/updated.c-460.jointstatement.pdf

maintenance of public trust that Health Canada provide clear public records outlining how their conflict of interest rules or guidelines are, or are not, applied.

While the federal government indicated setting goals for dietary sodium was a key achievement (Prime Minister of Canada, Ottawa Canada, December 30 2010 http://pm.gc.ca/eng/media.asp?id=3861), this was followed less than 1 year later by the federal government subsequently rejecting a federal provincial and territorial national policy that outlined the mechanisms required to achieve that agreed to goal. The rejected report had the support of the Premiers of Canada, while the nongovernment health and scientific sector and the food industry had previously agreed to similar recommendations in the Sodium Working Group report. Although government opinion polls indicated that the majority of Canadians wanted federal government policy and intervention, the federal Minister of Health did not publicly speak to the important health benefits of reducing dietary sodium rather indicated that the government did not want to place a burden on the food industry. (Carly Weeks, Globe and Mail, Toronto Canada,

http://www.theglobeandmail.com/life/health-and-fitness/harper-must-demand-action-on-sodium-levels-health-groups-urge/article4085788/).

The federal government rejected calls to regulate trans fats levels in foods by scientific health care groups and its own experts. (Lauren Vogel, Canadian Medical Association Journal, Ottawa Canada June 14 2010

http://www.cmaj.ca/content/early/2010/06/14/cmaj.109-3284.full.pdf; Sarah Schmidt, FAIR Protecting whistleblowers who protect the public interest, Ottawa Canada, Feb 7 2012 http://fairwhistleblower.ca/content/health-minister-nixed-plan-limit-trans-fats-food)

The federal government indicated it would not monitor trans-fats in Canadian foods as advised scientific health care groups and its own experts. (Sarah Schmidt, Post media, Toronto Canada, July 20 2012,

http://www.canada.com/health/Feds+drop+trans+monitoring+foods+despite+expert+advice/6960561/story.html)

The federal government interventions to 'water down' a United Nations Declaration on the prevention and control of non-communicable diseases relating to unhealthy foods and diets (9).

The lack of tangible policies to improve healthy eating following implementation of the Pan Canadian Healthy Living Strategy (10).

The federal government discontinued monitoring the accuracy of nutrition facts tables on foods after they found the labels were often inaccurate. (Global News, Toronto

Canadahttp://www.globalnews.ca/canadian+nutrition+label+claims+often+wildly+misleading+tests+show/6442625352/story.html)

Canada's lack of health economic modeling of the adverse health effects of foods when many other countries have such models(11).

The immediate dismissal of an Institute of Medicine report on easy to understand mandatory front of package food labeling as 'not required in Canada' with evidence from government surveys that many Canadians do not understand the Nutrition Facts Panel (12).

The federal government summarily dismissed the comments of United Nations special rapporteur on the right for food, Olivier De Schutter, who concluded that Canada had serious problems in providing for food security especially for the poor and aboriginal communities, despite Canadian government published reports on the evolving food crisis in poor and aboriginal communities (Heather Scoffield, Globe and Mail, Toronto Canada May 16 2012

http://www.theglobeandmail.com/news/politics/ottawa-shrugs-off-un-warning-on-hunger-and-nutrition/article4184575/)

Canadian government partners with private sector including a donut franchise (Tim Hortons) to promote physical activity to prevent diabetes in aboriginal children potentially creating misunderstandings that unhealthy eating resulting in obesity is the major contributor. (Cailin Rodgers, Office of the Honourable Leona Aglukkaq, Ottawa Canada, June 19 2013. http://www.phac-aspc.gc.ca/media/nr-rp/2013/2013_0619-eng.php)



Committee	Mandate		
Sodium Working Group	To develop and oversee implementation of a strategy that would result in lowering the sodium content of the diets of Canadians to within the range recommended by the Institute of Medicine of the National Academies.		
Food Regulatory Advisory Committee (FRAC) (later renamed the Food Expert Advisory Committee)	To provide the Food Directorate (FD) with broad expert strategic policy advice on the safety of food products and also advice on matters relating to strategic planning, priority setting and environmental scanning of issues related to food safety, nutritional quality or other issues related to the FD's mandate.		
Natural Health Products Program Advisory Committee	To provide the Natural Health Product Program Directorates with views, feedback, advice and recommendations, including technical, scientific, ethical and communications, on current and emerging issues relevant to the Canadian regulatory framework for natural health products, in order to help facilitate Health Canada decision making.		
The Infant Feeding Expert Advisory Group	To guide the revision of infant feeding guidelines for the healthy term infant including assisting in the collection and review of current evidence to inform guideline revision, reviewing and commenting on the draft guidelines and supporting materials, liaising with their respective organizations to coordinate their review and signoff of the guidelines prior to publication and coordinating the broad dissemination of the guidelines		
The Pediatric Expert Advisory Committee	To provide the Health Products and Food Branch with broad strategic advice on how to strengthen the availability, use and sharing of information specific to the pediatric population and pregnant and nursing women on the benefits and risks of health products, food safety and promoting health nutrition information.		
Expert Advisory Committee on the Vigilance of Health Products	To provide the Health Products and Food Branch with ongoing, broad, strategic policy advice on the safety and therapeutic effectiveness of marketed health products for human use.		
Food Guide Advisory Committee	Mandate not available but members were chosen for the varied perspectives they would bring from public health, health policy, nutrition education, disease prevention, industry and communication in assisting the revision of the 2007 food guide.		

Table 3: Declared interests of members of Canadian federal government advisory committees relating to food

Committee	Members with financial interest. Number (%)			Publicly availabl
	Direct*	Indirect**	Direct or Indirect	minutes
Sodium Working Group	6 (35)	5 (29)	8(47)	No
Food Regulatory Advisory Committee***	6 (32)	11 (58)	13 (68)	Yes
Natural Health Products Program Advisory Committee	Not disclosed	Not disclosed	Not disclosed	No
The Infant Feeding Expert Advisory Group	3 (38)	0	3(38)	No
The Pediatric Expert Advisory Committee	1 (7)	6 (43)	7 (50)	No
Expert Advisory Committee on the Vigilance of Health Products	3 (23)	8(62)	10 (77)	Yes
Food Guide Advisory Committee	Not disclosed	Not disclosed	Not disclosed	No

^{*}Direct financial interests: Current employment, investments in companies, partnerships, equity, royalties, joint ventures, trusts, real property, stocks, shares, or bonds with the regulated industry

^{**}Indirect financial interests: (a) Within the past five years, payment from the regulated industry for work done or being done, including past employment, contracts, or consulting; or financial support including research support, personal education grants, contributions, fellowships, sponsorships, and honoraria. (b) Within the past five years, materials, discounted products, gifts, or other benefits, or attendance at meetings where all or part of the travel and accommodation costs were provided by the regulated industry. (c) Within the last three years, grants or other funding from the regulated industry to any of the organizations where the member is currently employed or participates in internal decision making.

^{***}renamed Food Expert Advisory Committee

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