

Alberta's **2015** Summary Report Card on
Healthy Food Environments and Nutrition for
Children and Youth

THE 2015 REPORT CARD ON HEALTHY FOOD ENVIRONMENTS AND NUTRITION FOR CHILDREN AND YOUTH

Poor nutrition and obesity are major health concerns facing Canadian children and youth. The 2015 Report Card is the first assessment of how Alberta's current food environments and nutrition policies support or create barriers to improving children's eating behaviours and body weights.

In 2014, a review of the literature to identify indicators relevant to children's food environments was undertaken and a grading system was developed. Over 20 of Canada's top experts in nutrition and physical activity worked together with decision makers and practitioners to develop the Report Card.¹

In 2015, an Expert Working Group of academic experts and representatives with expertise related to childhood obesity, eating behaviours, food environments and nutrition policy from non-government organizations from across Canada discussed and graded the best available data for 41 indicators across 16 categories. Detailed grades of each of the 41 indicators can be found in this long-form report. A short-form report is available.

Our aim through this assessment is to increase public, practitioner and decision maker awareness of the relevance and status of food environments for children and youth, with a focus on health promotion and obesity prevention. The Report Card will serve as a tool for all levels of government and non-government organizations, researchers, corporations and foundations to support and develop enhanced programming and policies, as well as identify areas that require further action.

This year, the purpose of the Report Card was to:



Monitor

We have outlined a set of policy-relevant benchmarks that can be used to gauge the state of children's food environments and progress in developing policy over time.



Engage

We hope to stimulate a provincial and national dialogue on the state of children's food environments and related policies.



Inform

We communicate findings of the Report Card to the public, practitioners and decision makers to increase awareness of how current food environments and policies limit or support children's opportunities to enjoy healthy foods.



Study

We have outlined a policy-relevant research agenda related to children's food environments. We plan to gather evidence, resources and toolkits on obesity-related policy specific to Canada and to share what we learn.

The Report Card begins by highlighting the importance of food environments and nutrition for children and youth in terms of health promotion and obesity prevention. The Short Form Report Card then provides scores for 16 categories across 5 types of environments in Alberta.



HEALTHY EATING IN CANADA

Why is Healthy Eating Important?

Many studies highlight the benefits of healthy eating behaviours for children and youth. In fact, healthy diets can help prevent childhood obesity and chronic disease.^{2,3} Eating behaviours and patterns established in early years are often sustained into adulthood⁴⁻⁶ and children who are overweight are more likely to have unhealthy body weights into their adult lives.⁷ Nearly one-third (approximately 1.6 million) of Canadian children between the ages of 5 and 17 years were classified as overweight or obese between 2009 and 2011.⁸

Healthy eating is more than an individual choice and may be influenced by the environments in which we live. For example, the community nutrition environment defined as the number, type, location and accessibility of food stores, can influence individuals' food choices for better or for worse.⁹ Living in a community with predominantly unhealthy food stores, for instance, has been found to increase consumption of unhealthy foods because these items are more accessible and are heavily promoted.⁹⁻¹²

Obesity rates in Canadian children and youth have been on the rise since the 1970s⁸



To improve children's eating behaviours and body weights, it is helpful to understand how current food environments and policies may act as barriers or facilitators to healthy eating.^{10,13} Although policies and actions can be difficult to change due to competing interests,^{10,14} governments have the responsibility to ensure environments provide and encourage healthy food choices, thereby protecting and promoting child health.¹³






The Report Card on Healthy Food Environments and Nutrition for Children and Youth contributes to understanding the status and impact of current nutrition-related policies and actions in Alberta. It highlights where we are succeeding and where more work is needed to support the health of children and youth.¹



FRAMEWORK AND ORGANIZATION

The 2015 Report Card used the conceptual framework developed by Brennan and colleagues¹⁵ as an overall guide. This framework depicts how policies and environments can interact and shape health-related behaviours and body weights of children. The framework suggests that there are **four micro-environments (physical, communication, economic, and social)** that have policies and actions embedded within each. To understand the infrastructure that supports policies and actions, within micro-environments, the **political macro-environment** was also examined.^{1,12} The figure below depicts the different types of food environments that may influence the eating behaviours of children and youth^{1,11,15} and lists examples of each.¹

Types of Environments

MICRO-ENVIRONMENTS	
 <p>PHYSICAL</p>	The physical environment refers to what is available in a variety of food outlets ¹¹ including restaurants, supermarkets, ¹⁶ schools, ¹⁷ worksites, ¹⁸ as well as community, sports and arts venues. ^{19,20}
 <p>COMMUNICATION</p>	The communication environment refers to food-related messages that may influence children's eating behaviours. This environment includes food marketing, ^{21,22} as well as the availability of point-of-purchase information in food retail settings, such as nutrition labels and nutrition education.
 <p>ECONOMIC</p>	The economic environment refers to financial influences, such as manufacturing, distribution and retailing, which primarily relate to cost of food and can affect food choice. ¹¹ Costs are often determined by market forces, however public health interventions such as monetary incentives and disincentives in the form of taxes, pricing policies and subsidies, ²³ financial support for health promotion programs ²² and healthy food purchasing policies and practices through sponsorship. ¹⁹
 <p>SOCIAL</p>	The social environment refers to the attitudes, beliefs, and values of a community or society. ¹¹ It also refers to the culture, ethos or climate of a setting. This environment includes the health promoting behaviours of role models, ¹¹ values placed on nutrition in an organization or by individuals and the relationships between members of a shared setting (e.g. equal treatment, social responsibility).
MACRO-ENVIRONMENT	
 <p>POLITICAL</p>	The political environment refers to a broader context which can provide supportive infrastructure of policies and actions within micro-environments. ^{1,22}

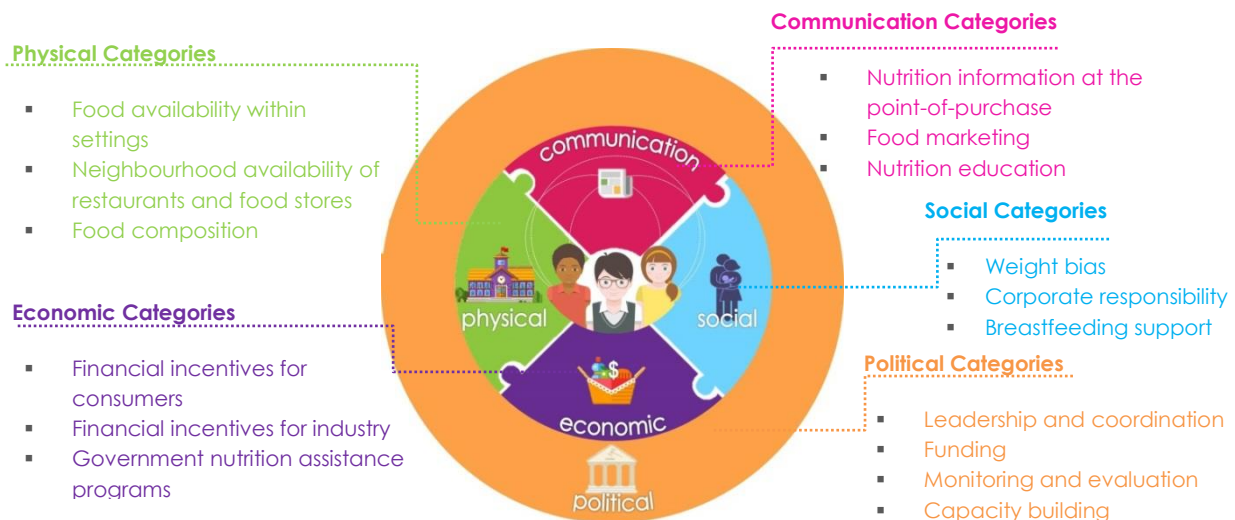


Figure 1: Adapted conceptual framework highlighting key categories embedded within each environment^{1,11,15}



GRADING SCHEME

Based upon the best available scientific knowledge and data on policies, programs and actions relevant to each indicator, the Expert Working Group used the grading scheme illustrated below to assign a grade to each indicator. The grading scheme follows a series of four key decision steps:

- i. Has the benchmark been met?
- ii. Are supports in place?
- iii. Is monitoring in place?
- iv. Are high risk groups (e.g. aboriginal, minority, and socioeconomically disadvantaged groups) addressed?

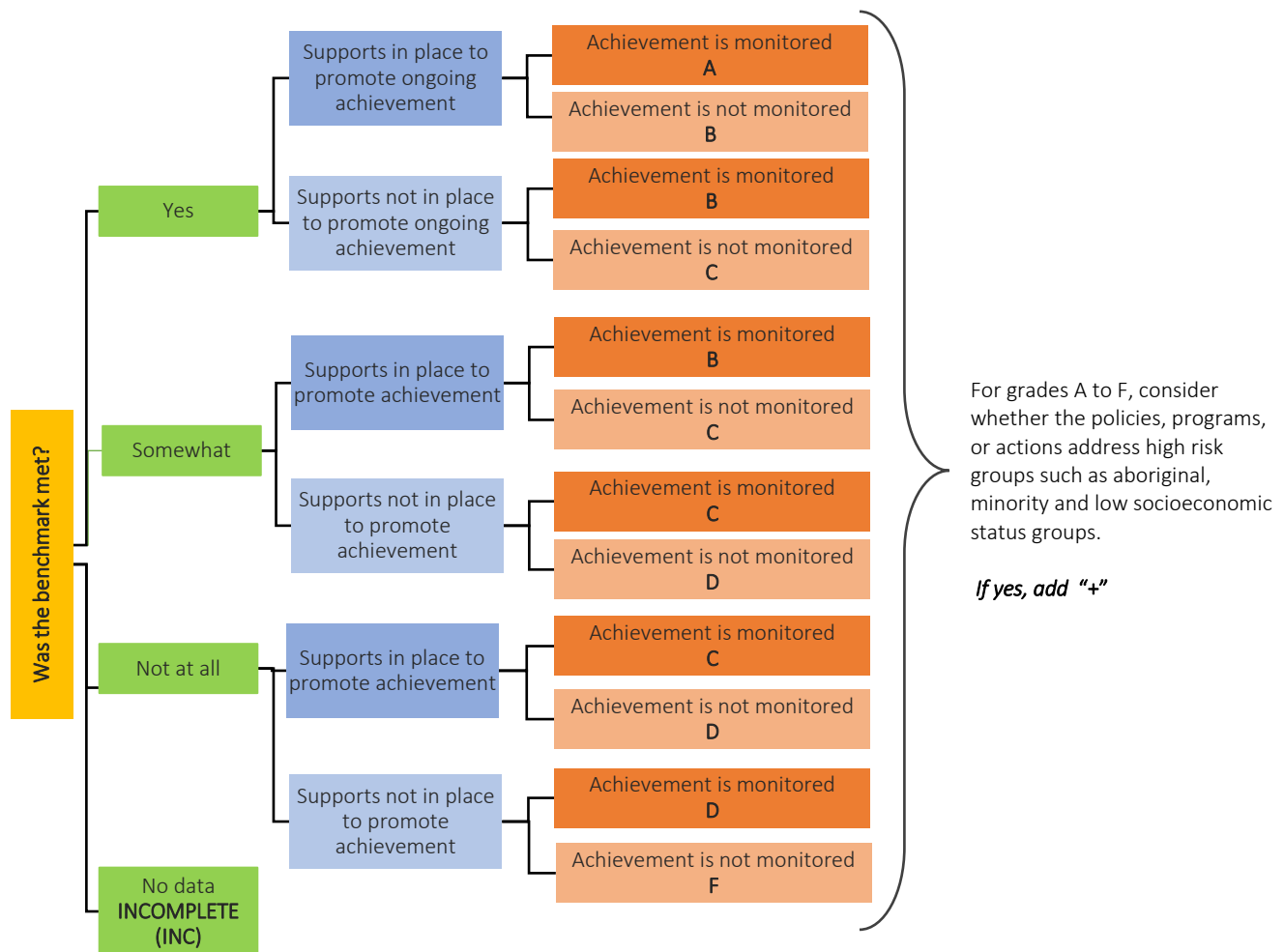


Figure 2: Grading system flow-chart¹

Although a "+" grade is appended to indicate a high-risk population is addressed, a "-" can be assigned based on judgment by the Expert Working Group in cases, for example, when supports and/or monitoring systems existed previously, but were discontinued in recent years.



GRADE		CATEGORY		
PHYSICAL ENVIRONMENT	C	Food Availability Within Settings <ul style="list-style-type: none"> Although nutrition policies exist to support the offering of healthy foods and beverages, such as the Alberta Nutrition Guidelines for Children and Youth²⁴ (ANGCY), adherence is minimal across schools, childcare and recreation facilities.²⁵⁻³⁰ 		
		C School	INC Childcare	D Community
		<ul style="list-style-type: none"> A survey of school principals found that 91% reported using the ANGCY yet only 63% incorporated these guidelines into school nutrition policies.²⁵ A detailed study limited to 10 schools found 66% of foods in vending machines were considered “Choose Least Often”. Chips and chocolate bars were the most common items in snack vending machines, representing 48% and 16% of all snack vending machine products, respectively. None offered fruits or vegetables.³⁰ 	<ul style="list-style-type: none"> This year, data was limited to a study undertaken in two childcare settings. Although the majority of foods aligned with the ANGCY “Choose Most Often”, generalizations cannot be made across the province.²⁶ 	<ul style="list-style-type: none"> Most foods and beverages (61-93%) available at concessions and in vending machines within 6 recreation facilities were considered “Choose Least Often”.
C	Neighbourhood Availability of Restaurants and Food Stores <ul style="list-style-type: none"> The Centers for Disease Control and Prevention (CDC) procedure was used to calculate the modified Retail Food Environment Index (mRFEI)³¹⁻³³ for each census tract within Edmonton and within Calgary. From the total number of food stores and restaurants considered healthy (e.g. supermarkets) or less healthy (e.g. fast food outlets) in a census tract, the mRFEI represents the percentage that are healthy. <ul style="list-style-type: none"> 26% of all census tracts in Edmonton and 33% all census tracts in Calgary met the benchmark of having a median mRFEI score of ≥ 10. Within impoverished census tracts, 28% in Edmonton and 35% in Calgary met the benchmark of having a median mRFEI score of ≥ 7. Most schools in Edmonton (63.8%) and Calgary (79.7%) have at least one convenience store or fast-food outlet within 500 metres. 			



C	<p>Food Composition</p> <ul style="list-style-type: none"> • Industry has shown significant progress in reducing the trans fat content of restaurant foods, as well as a number of foods on the market to meet the government recommended limits.^{34,35} • Only 30% of children’s cereals sold in the top two supermarkets (by sales)³⁶ sampled in Edmonton met the benchmark of 100% whole grain content and <13g of sugar per 50g serving.
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	GRADE	CATEGORY
COMMUNICATION ENVIRONMENT	D	<p>Nutrition Information at the Point-of-Purchase</p> <ul style="list-style-type: none"> • Menu and shelf labelling systems are not in place in Alberta. • Although a Nutrition Facts label is mandated and regulated federally on almost all packaged foods, a simple and more accessible front-of-package label is not in place.^{37,38}
	B	<p>Food Marketing</p> <ul style="list-style-type: none"> • Various provincial and federal government-sanctioned public health campaigns exist to encourage children to consume healthy foods, such as Alberta’s HealthyU 5&1 Experiment^{29,39-41} and Canada’s Eat Well Campaign.⁴² • Initiatives and policies to restrict marketing of unhealthy foods to children are not in place provincially, and national industry standards are limited.^{43,44}
	C	<p>Nutrition Education</p> <ul style="list-style-type: none"> • Nutrition education is incorporated in the mandatory health courses within the Alberta school curriculum for students in grade K-12.^{45,46} • Alberta does not require teachers and childcare workers to participate in nutrition education/training.



ECONOMIC ENVIRONMENT		GRADE	CATEGORY
ECONOMIC ENVIRONMENT	D	Financial Incentives for Consumers	<ul style="list-style-type: none"> Alberta is not considering tax credits or incentives as a nutrition policy or to promote healthy eating.⁴⁷ A minimum excise tax of \$0.05/100mL is not applied to sugar-sweetened beverages sold in any form.⁴⁷
	F	Financial Incentives for Industry	<ul style="list-style-type: none"> There is no evidence to suggest that corporate revenues earned via sales of <u>healthy</u> foods are taxed at a <u>lower</u> rate, nor evidence that corporate revenues earned via sales of <u>unhealthy</u> foods are taxed at a <u>higher</u> rate in Alberta.
	C	Government Nutrition Assistance Programs	<ul style="list-style-type: none"> Between 2011 and 2014, the proportion of children living in households that access food banks declined by 16.8%.^{48,49} Although the majority of food items contained in Edmonton's Nutritious Food Basket align with the ANGCY, the monthly cost of the food basket exceeds social assistance food allowances.^{24,50-52} Alberta does not provide monthly vouchers to purchase fruits and vegetables to all social assistance recipients. Emergency and seasonal food vouchers are available in some communities, as well as vouchers to support pre- and post-natal women (including First Nations women).⁵³⁻⁵⁵ Various programs work towards improving fruit and vegetable provision to students within high need schools, however these programs are not universal.⁵⁶⁻⁶³

SOCIAL ENVIRONMENT		GRADE	CATEGORY
SOCIAL ENVIRONMENT	F	Weight Bias	<ul style="list-style-type: none"> Alberta schools and childcare curricula do not offer explicit education regarding weight bias to children.⁶⁴
	D	Corporate Social Responsibility	<ul style="list-style-type: none"> Only 3 of 17 food and beverage companies listed on the Access to Nutrition Index, a global index that ranks food and beverage companies based on their nutrition-related commitments, practices and performances, achieved a score above 5.0 out of a total possible score of 10.0. Most (65%) of these companies that operate in Canada scored <3.0.⁶⁵
	C	Breastfeeding Support	<ul style="list-style-type: none"> Alberta does not have any WHO Baby-Friendly designated facilities.^{66,67} 87% of Alberta hospitals with maternity services having at least 10 births per year had a written breastfeeding policy in place.^{68,69}



POLITICAL ENVIRONMENT	GRADE	CATEGORY
	C	<p>Funding</p> <ul style="list-style-type: none"> Limited funds are allocated from the Alberta Government’s health budget to support its childhood healthy living/obesity prevention strategy/action plan. Based on available data, it was not possible to determine whether at least 1% of government research funds were dedicated to healthy eating and obesity prevention at the provincial level.
	C	<p>Monitoring & Evaluation</p> <ul style="list-style-type: none"> The Healthy Weights Initiative,^{70,71} the MEND initiative⁷² and the Alberta Healthy School Community Wellness Fund⁷⁰ have undertaken evaluations of the impact of policies and actions associated with Alberta’s childhood healthy living and obesity prevention strategy/action plan. Although the Alberta Child Health Surveillance survey⁷³ was conducted once in 2005, other surveillance mechanisms capturing diet and weight for children and youth provincially and nationally are conducted regularly. They include the Canadian Community Health Survey–Annual Component (annually),⁷⁴ the Canadian Community Health Survey–Nutrition(occasionally),⁷⁵ and the Canadian Health Measures Survey (biennially).⁷⁶ Monitoring systems are not in place to track adherence to mandated nutrition policies.
	A	<p>Capacity Building</p> <ul style="list-style-type: none"> Government and non-government level organizations exist in Alberta to oversee the childhood healthy living/obesity prevention strategy/action plan, such as Alberta Health–Health Promotion Coordinators.⁷⁷ Online resources and media campaigns, such as Heathy U^{29,39,78,79} and the Canada’s Healthy Eating Toolbox^{29,80,81} are available to support achievement of the childhood healthy living/obesity prevention strategy/action plan. Although the ANGCY²⁴ exist, they are not mandated in schools, childcare, and recreation facilities. There is national adoption and dissemination of population-level dietary guidelines for children and resources to support their application. Limited data exists regarding free training to enable public and private sectors to comply with nutrition policies.



METHODOLOGY, DETAILED FINDINGS & ADDITIONAL RESOURCES

Our interdisciplinary research team identified and assessed food environment and nutrition indicators to provide data that were used to assign grades for the Report Card. To do so, we used the best available data, research and key issue areas from the past year. In future Report Cards, our research team aims to assess trends over time, to show where improvements have been made and where work is still needed to support healthy eating for children and youth.

The detailed long-form Report Card provides further details on the Report Card's background, methodology, and a set of complete references. Visit www.powerupforhealth.ca to download the long- and summary-form versions of the Report Card and access research articles and our media release that will help you further understand and share the 2015 Report Card findings with others. On our website, you can also access a list of references for Alberta's Summary Report Card.

WHO WE ARE

POWER UP! is a team of researchers, practitioners and policy makers who have come together to gather and share evidence on chronic disease prevention with Canadians. We provide leadership, tools and support to decision makers, researchers, practitioners and the public with the aim of supporting policy for a healthy Canada. We are a Coalitions Linking Action & Science for Prevention (CLASP) initiative of the Canadian Partnership Against Cancer:



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The views expressed herein represent the views of the authors and do not necessarily represent the views of Health Canada or the Canadian Partnership Against Cancer.

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POWER UP!
School of Public Health, University of Alberta
3-300 Edmonton Clinic Health Academy
11405 87 Avenue
Edmonton, AB T6G 1C9

