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Chair

Mr. Rob Merrifield

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• (1535)

[English]

The Chair (Mr. Rob Merrifield (Yellowhead, CPC)): We want to thank the witnesses for coming forward and for their testimony before the committee. It's been a very interesting session on childhood obesity. This is the eighth meeting, I believe.

We welcome you back again.

We have Mary Bush from the Department of Health talking about Canada's Food Guide. I'll ask you to introduce the people from your department as well.

We will start with your presentation. The floor is yours.

Ms. Mary Bush (Director General, Office of Nutrition Policy and Promotion, Health Products and Food Branch, Department of Health): Thank you very much, and let me thank you for the kind invitation to be here.

We've been following the deliberations of this committee with great interest. It's truly a privilege to be invited back and to be able to share with you some of the issues around process and evidence in developing a food guide.

I'd like to start by introducing my colleagues. There's a coterie of us from Health Canada. I'll start with Janet Pronk, the acting director, policy and standard setting. It is within the policy and standard setting group that Canada's Food Guide is evolving, and Janet has a lot of involvement in this particular initiative.

Chantal Martineau, who is actually the lead on the food guide development itself, sends her regrets. She's at the Montreal meetings, *les journées annuelles de santé publique*, that are going on currently.

Also with me is Danielle Brulé, who is the director of research, monitoring and evaluation, and who has played a very significant leadership role in the science that's underpinning Canada's Food Guide. Also here is Elaine De Grandpré, who is a nutritionist in our dissemination and outreach area. She has taken on the significant challenge of ensuring that the messaging and packaging of the food guide itself in terms of delivering appropriate messages to Canadians is done well and that it is understood.

As well, we have Lori Doran, who is the acting director of the chronic disease and injury prevention group within the first nations and Inuit health branch of Health Canada is here. She will share some insights on that particular initiative, in which I know the committee has an interest.

My hope today is to engage in a discussion and to allow you an opportunity to ask questions. I'm going to run through a bit of a presentation, because I think it's important that we all start with the same understanding of what has been done to date.

You've heard a lot about the food guide. You've had a lot of people share their perspective on the food guide with you. I'd like to start by making sure everyone understands that the only food guide that people have seen is the food guide that was put out last November for consultation. It was in fact put out precisely for the reason that we wanted to get people's input to enable us to put out the best tool we could.

My plan here is to provide an overview of process, of the evidence used to guide this development, to discuss obesity in relationship to the food guide, and look at the next steps. But we are mainly here to provide an opportunity for your questions and discussions.

Canada's Food Guide actually is designed to promote a pattern of eating that will meet nutrient needs, promote health, and minimize the risk of nutrition-related chronic diseases. We consider it to be a very important and significant evidence-based policy vehicle. It is taken with great seriousness by those of us in the department and others across Canada. Canada's Food Guide is not only used to try to explain to Canadians what healthy eating means, it also underpins policies and programs that are used by provincial, regional, and local governments.

The evidence base that underpins this work has been significant. We have updated nutrient standards, the dietary reference intakes, which are a set of nutrient standards that have been executed by the National Academy of Sciences' Institute of Medicine in the U.S.

I think it's important that you understand that up until the mid-1990s it was in fact Health Canada, along with expert advisory committees, that actually reviewed science, looked at where the evidence had moved, and put out the Canadian dietary standard. The name was changed to nutrition recommendations over time. But it was in fact Health Canada.

In the mid-1990s, with the recognition that the complexity of the science that underpins nutrition was now sufficiently complex, and because there was a need to call on the best science and the best scientists that we could access, it moved to a more North American platform. We've been working with the Institute of Medicine ever since.

Through a review of literature and synthesis of what's known, eight reports have come from eight nutrient panels. It's all with the goal of taking the best that nutrient science has and putting forward a statement of nutrient standards about how much of each nutrient is needed. For those nutrients that we know play a role in chronic disease, such as fat, trans fats, saturated fat, the goal is to establish acceptable macronutrient ranges.

Beyond that, because much of the evidence that underpins diet and health is not simply on a nutrient basis but on a food basis, we've undertaken a review of foods and chronic disease and looked at that evidence. That's a very significant undertaking, and not one for which we're resourced to execute in terms of manpower or time. We called on work that has already been done. We looked at the WHO-FAO joint report on diet and nutrition in the prevention of chronic diseases, as well as the work done by the dietary guidelines advisory committee in 2004.

The goal there was to look at what we knew from the literature about foods and food patterns and health outcomes, and make sure we captured and reflected that in Canada's Food Guide as best we could. For example, we know that fruits and vegetables provide protection against forms of cancer and cardiovascular disease. You don't want to generate a food guide based on a nutrient platform and miss the very important relationship with food and food patterns. So that work was also part of our evidence base.

On the environmental context, we know that Canada is a different place from it was 30 years ago. There are socio-demographic and cultural changes to the profile of who we are. There has been significant evolution in the foods in the marketplace, and we needed to make sure we captured and understood what was going on in the environments in which Canadians are eating.

We also undertook a significant review of the 1992 food guide. Canadians and the stakeholders who were involved in the review identified strengths of the 1992 food guide, including flexibility, simplicity, visual appeal, and high recognition, but they also identified significant challenges in understanding and using it.

The challenges that were identified included confusion about serving sizes, serving ranges, and the use of terms such as moderation. We were told they didn't understand what that meant. There was the perception that the graphics themselves were out of date. We had clumped together in 1992 something we called "other foods". They included what I'll call non-nutritious, high-sugar/salt snack foods, water, and essential oils, with the one overriding direction: moderation. We were quite appropriately challenged on why we would be encouraging Canadians to moderate their intake of water, and at the same time use one message for this entire group of foods. So several problems were identified, and all of those challenges have informed the food guide revision.

We initiated the revision in 2004 and put together a range of advisory committees to help us with the task. We already had a dietary reference intake expert advisory committee that had been put in place to take the science of the Institute of Medicine's nutrient standards and help us interpret and implement that into a range of guidance for Canadians. They were called upon to really help us with what that work suggested to us in terms of a dietary pattern. I'll touch on the process shortly.

There was an interdepartmental working group established. We called on the various branches in the health portfolio, as well as CIHR and our colleagues in the Public Health Agency of Canada. We also involved INAC, the Agriculture and Agri-Food group, and Canadian Heritage to help us with the multicultural challenges. Its mandate was to give a broader Government of Canada view to this issue.

• (1540)

We then established a food guide advisory committee. We put it together to bring into the loop a range of different stakeholder perspectives on dietary guidance. We tried not to line ourselves up with people who looked at the world the way we did as a department of health. Rather, we considered a range of perspectives. We wanted to hear first-hand from stakeholders outside the process. The membership included knowledgeable individuals who provided advice from a range of perspectives, including public health, industry, education, health policy, nutrition, disease prevention, and communication. At the same time, we tried to ensure that we captured both national, provincial, and local perspectives.

I'll now turn to the food guide content.

Through our process, which involved several advisory groups and consultation, we came up with a pattern of eating that would provide age- and sex-specific guidance on amounts and types of food. This was in response to the criticism we encountered when we reviewed the 1992 food guide. People said we had such large ranges that they had no idea how much they needed to eat. We wanted to ensure that people didn't think they needed to eat more than they did. The recommendations were age- and sex-specific based on specific nutrient requirements. The pattern reflects the food supply available to Canadians and their eating habits. If you were to go to, say, Thailand, or to other countries, you would see a different pattern. All food guides, regardless of where they're issued, look at the food supply, the kinds of things that people eat, and include it in their dietary pattern. So if you were putting a food guide together in Singapore, for instance, bread wouldn't be part of it, because bread is not a staple there.

In developing the food guide pattern for each of 16 age and sex groups, 15 diets were generated, following what the pattern laid out in amounts and type of food. Distributions were assessed in terms of nutrient adequacy. This led us to develop more specific messages to make sure we were getting adequate advice, and that we didn't favour Canadians consuming too much energy, too little folic acid, or not enough fibre. We examined all these parameters in the 500 diets for each age and sex group. And we took one extra step: we made sure that if we were assessing a dietary pattern for children we actually used popular children's food choices. We derived the data from our provincial surveys, which have been going on for the last decade.

Once we got the pattern, once we packaged the pattern so as to ensure that we had adequate direction in communication, we went out to consultation. Our consultations started back in January 2004 with a meeting in which we brought together stakeholders from all aspects of food guidance to discuss what we had found in the review. We all agreed it was time to go into a revision. In May 2005, we crossed the country, holding 13 regional meetings in the provinces and up in Yellowknife. In these meetings, we shared the direction we were taking and allowed stakeholders to tell us if they thought we were headed in the right direction. We didn't just show them what the food guide was going to look like. We told them that our plan was to have something in hard copy but to put a lot of emphasis on the Internet, to have educator-communicator material, and to include something special for Inuit first nations.

● (1545)

What we heard back from this process was that it's good to really enhance the web, for instance; we think that's going to have lots of use for schools and for many people, but you must ensure that you have hard copy, because that's very much the piece that is used in teaching situations across the country.

In November 2005, we actually launched our national consultation activities. That was done with online as well as regional meetings. The online consultation was in fact designed to enable people right across Canada to provide input to us in a relatively easy manner.

However, with that online consultation came constraints. One of the criticisms I think you've heard is that there was little focus on the actual pattern and more focus on the packaging of the pattern. That was, indeed, a constraint that emerged out of the online approach to this consultation. And part of that was due to our wanting and needing to take the consultation down a pathway that asked specific questions but at the same time provided Canadians an opportunity to say to us, "We think you've missed it. We think there's a problem with what you've done." So there was a question, and it was how we ended the entire consultation: "Do you have anything else you wish to say to Health Canada about the Food Guide?"

In fact, over 6,000 Canadians participated in the online consultation, and from that we learned a great deal. At the same time, we went into focus testing because we wanted to ensure that the piece that we had put together was able to be used by Canadians, and we garnered input from that. Overall, the feedback was positive, but it was also very positive from our perspective in indicating where people thought we hadn't been direct enough, we hadn't gone far

enough, we had put in too much information. It brought a wealth of information to us that we're using right now as we take this food guide through to the end product.

The outcome of the pattern and the processes we're using is to ensure we have a pattern that, when followed, will provide the nutrients that are required for health. We know that it meets the nutrient requirements of Canadians, except for Canadians over 50, where there's a need for extra vitamin D, but we also want to make sure we're consistent with evidence that exists that associates the food pattern with reduced risk of a range of diseases, such as diabetes type 2, diabetes, obesity, cancer, and cardiovascular disease.

There is a tailored aboriginal food guide being developed. It's being tailored for aboriginal people and is inclusive of first nations, Inuit, and Métis. It recognizes the importance of traditional foods as well as non-traditional or store food. There has been broad support from national aboriginal organizations, from nutrition educators and health services providers, for the need and the importance of having something that's tailored to this target group.

My colleague Lori Doran, of the first nations and Inuit health branch, with her team, is leading this work. They have the expertise within the department in terms of first nations people. They have a nine-member advisory group. A needs assessment was undertaken with people who work with first nations, Inuit, and Métis. It was conducted in October 2005. There's a consultation under way now, or just completing, and there are focus group tests that are planned for November and December of this year. Their product is following slightly behind the main food guide, and Lori is here with information should you have more specific questions on that particular initiative.

In terms of overweight and obesity, we're very concerned. Part of what has driven us throughout the entire process is making sure we come up with guidance to Canadians, recognizing that they live in an environment where overweight is a significant health issue and, generally, overweight and obesity are of great concern to Canadians themselves. We and you, more than anyone, potentially recognize that obesity is a very complex issue.

● (1550)

We recognize there's a need for a comprehensive strategy. We looked internationally to the global strategy on diet, physical activity, and health that WHO developed. We were in fact very involved with the development of that particular strategy. Nationally, there has been the development of a pan-Canadian healthy living strategy.

It's only to anchor the fact that we recognize obesity is not something that a food guide is going to fix. It's not something that a food guide in and of itself will solve. But at the very least, we need to expect that the food guide will be a policy piece that provides Canadians with the kind of guidance they need in order to meet their food supply and enjoy their food in a knowledgeable manner.

This means we have to help Canadians understand that the food guide pattern that will emerge will in fact contain very basic foods. It means we're talking about breads and cereals, not croissants and muffins. There's very little room for extras in this pattern, such as cakes, pastries, french fries, ice cream, and alcohol. It requires different choices to be made.

On our next step in this process, we're looking to release a planned suite of products early in 2007. There will be a hard-copy consumer piece. There will be extensive web-based material for consumers. It will be an extension of what's in the actual policy piece, the consumer hard copy. But we'll also go further to try to enable Canadians to do some tailoring for themselves.

My example of this is that if you look at the age and sex specifics with which Canada's Food Guide will come out, we know we're giving a range of ages that starts at the age of four and goes up to over the age of 70. We know there's a certain amount of confusion in looking for your sex and age and coming down to the number of food guide servings that you would choose.

We're making a web-based platform where you can actually go to the Internet to put in your age, your sex, and the physical activities you enjoy, and you'll then have a printed copy of something you can put on your refrigerator as an adjunct to the hard-copy piece. There will be communicator-educator material as well.

We look at this whole suite of products as being step one on a pathway that we'll be able to add to as we start to be able to identify with increasingly specific evidence where we see the need to support Canadians with more information.

Mr. Chairman, that's my presentation. We welcome your questions.

•(1555)

The Chair: Thank you very much.

I think there's quite a bit of interest in this, with regard to the upcoming food guide. It is rather disturbing that you're going to take away our cakes, pastry, french fries, ice cream, and alcohol. You're going to be seen as worse than the tax man. Good luck with that.

We'll now open up the floor to questions.

We'll start with Ms. Dhalla, and then Ms. Bennett.

Ms. Ruby Dhalla (Brampton—Springdale, Lib.): Thank you very much for coming to the committee.

A number of the stakeholders we've had a chance to meet and witnesses over the past few weeks have expressed serious concern in regard to the consultation process that took place for the development of the food guide. I was quite interested in listening to your presentation. You mentioned that a number of groups and organizations were consulted. Could you perhaps provide this

particular committee with a list of some of the nutritional science experts who were consulted?

In regard to some of the working groups that you had, I believe you had a food guide advisory committee. Could you also forward this committee those names, along with the committee on dietary reference intakes? I believe it has a total of 11 individuals with experience in a variety of different areas.

You also mentioned that some online consultation took place and some of the restrictions surrounding that. I know you mentioned that you were trying to do as much outreach as possible.

Unfortunately, I think this committee has now heard from all of those stakeholders studying the topic of obesity, and no one seems to have been consulted. I think having those names come forward will allow us some insight into that.

Secondly, from your perspective, you mentioned online consultations. What type of advice were they able to provide? How many people partook in that type of consultation? How did the nature of those consultations change your final draft food guide that is now being put forward?

Ms. Mary Bush: I'll start, and I'll ask Janet Pronk to continue.

We actually have those lists. Those lists were requested. We actually generated those lists. They're part of what's gone to the department to come to this committee, and they are en route.

Specifically, you asked how the nature of the consultations influenced where it is that this food guide is going. I would say profoundly.

What we did in November was come out with a platform. It was the best we could do at the time. What we heard back was, "Sorry, it's not good enough." So what we've done is take the nature of, "Sorry, it's not good enough," and we have taken the next steps.

As an example, we had significant input around the issue of salt and sodium. A lot of people said that they thought we had missed it. We hadn't spent nearly enough time or enough energy ensuring that Canadians understand when they're choosing these foods that sodium or salt is an important issue.

Absolutely, that comment was correct. We've gone back, and we've engaged in making sure that when we come out we address that kind of issue.

•(1600)

Ms. Ruby Dhalla: Many of the individuals who came to this committee said that when they were asked for their particular advice and their input, they were asked to determine what colours the diagrams should be and where they should be placed on a page and what the pictures should look like, and they felt a tremendous amount of frustration that they weren't consulted in terms of content and substance.

I think their ultimate goal, like ours, is to ensure that the food guide is reflective of the multicultural dynamic we have in Canada, that it is reflective of the unique quality of each Canadian. You're obviously not going to have a food guide that caters to every single Canadian across the country, but they were just saying that their consultation was limited to determining where the pictures were going to be placed on the food guide.

Ms. Mary Bush: I saw that comment.

Ms. Ruby Dhalla: It was made by many people.

Ms. Mary Bush: I hear the comment, and I would say to you two things. First, the online consultation did look at packaging as well as content. Was there a specific question that asked whether you think the age- and sex-specific guidance we're giving is the way to go? We didn't ask that. Did we ask whether you think the number of fruits and vegetables that are part of the pattern for the age and sex groups from six to nine are appropriate? We didn't ask that.

This piece is absolutely rife with needs for decisions, and we're very anxious to hear from anybody who thinks this is not an appropriate pattern and to hear why. We are probably more interested than anyone on the planet when we hear from people that there is a problem, in their opinion. What we want to know is what the problem is and what the solution is.

So we've spent an enormous amount of time trying to take the input that's been given to us, understand it, reflect on it, and make sure that when we finish this process we have something that's stronger.

The Chair: We'll go to Ms. Bennett.

Hon. Carolyn Bennett (St. Paul's, Lib.): One of the concerns I think we have with the food guide is that it be all things to all people. Two weeks ago in Nunavut, in the grocery store, four litres of milk was \$16. What capacity does the food guide have to have people make alternate choices when certain groups are not available or are too expensive for people to actually access?

Ms. Mary Bush: I think your question is very good, in that the cost associated with the basket for healthy eating is a very significant issue. We're very concerned. This isn't specific to the food guide; this is specific to Canadians' food security and where the population is with respect to adequate resources to buy a nutritious basket of food.

So I think the question is an important one, and it's bigger than the food guide. But to answer your question specifically, we often hear that we have a lot of fruits and vegetables in that food guide and are asked if it will be something that people can afford to buy. We hear that. We have the question asked, and what I can say to you is that we look at the food pattern and we look at the costing of that basket. I think it's important for you to know that there is a nutritious food basket that is actually based on the food guide of the day. It is that basket that is costed right across Canada and used by provincial and local municipal governments in terms of social assistance programs, in terms of calculating the amount it's going to cost. So costing food baskets is part and parcel of what emerges from a food guide.

But in order to assure ourselves that this wasn't going to be a pattern that was too costly for fruits and vegetables, for instance—

•(1605)

Hon. Carolyn Bennett: You address the nutrient standards, but again, on the evidence around foods that prevent cancer or heart disease, or things such as omega-3, how are we advising Canadians now? That is my number one concern. This isn't only about nutrients anymore; it's about how you make healthy choices, from farmed salmon to non-farmed salmon; how you make choices on whether it is really calcium you need, or is it vitamin D.

Maybe in the next round we'll deal with the aboriginal piece in terms of so much of this being based on a 70-kilogram white male. That's what I learned in medical school, and that seems to be how this thing is sorted out. How do we help people make other choices if they're from genetic backgrounds where they're clearly lactose intolerant? This just seems to be one size fits all.

I know you've worked hard on the web-based strategy, but I am concerned. As you know, my number one question has always been, is there evidence? I know you will always tell me that it's the most requested piece of government literature, but do we have any evidence that this piece of literature has ever changed anybody's behaviour?

Ms. Mary Bush: I think it's a good question. I would answer no, we don't have rigorous evidence that the food guide is the vehicle to change behaviour broadly. I don't think there is good evidence that a piece of paper really does that. We know behaviour change is more to ask of one piece of paper than is possible.

What we do know, though—

Hon. Carolyn Bennett: Is there a double-blind study, or a study where you have the food guide in certain households and don't have the food guide in other households, and these households end up less obese?

Ms. Mary Bush: No, there is not.

Hon. Carolyn Bennett: Then why do we do it?

Ms. Mary Bush: Why do we do the food guide? I think the food guide is absolutely an essential undertaking, because more than anything else, people want to know what healthy eating means. We all talk about healthy eating. Oh, it's important for chronic disease prevention, it's important for healthy growth and development, it's important for health, but what does that mean? You need to be able to help a population understand what healthy eating means and what it looks like. If I want to follow a healthy pattern of eating, what does that mean? If you look over time, you'll see that the food guide changes, and it changes very much.

Hon. Carolyn Bennett: I think the question is, did it change anybody's behaviour? Are they making better choices?

The Chair: Our time is gone, but if someone wants to answer that very quickly, we'll allow that, and then we go to Ms. Gagnon.

Ms. Éleine De Grandpré (Nutritionist, Planning, Dissemination and Outreach, Office of Nutrition Policy and Promotion, Department of Health): I've been a dietician for 16 years. A lot of my colleagues do develop educational resources to use either in the schools or with clients or with patients. Some resources will use the food guide as a basis of comparison.

For example, if a person is looking at the food guide for guidance, they say, okay, I need about x amount of fruit and vegetables. If that person is not eating this amount of fruit and vegetables, there is research out there, which I don't have on hand here, that shows that if you switch your pattern of eating, if you make changes to try to reach your goal in terms of vegetables and fruit, the rest of your diet would naturally change, because at some point there is a certain volume that we eat in a day, and you might end up eating less pastry because you're having fruit as a snack.

It can be used like that by many health professionals in the field who do develop resources and use it as a basis for their work.

The Chair: Thank you.

Madame Gagnon.

[Translation]

Ms. Christiane Gagnon (Québec, BQ): Thank you, Mr. Chairman.

You haven't convinced me of the need to produce a new food guide because you're unable to provide us with data on the impact of Canada's current guide. It might be important to study its effects on society. There's been an increase in obesity. The only information I have to assess *Canada's Food Guide* is that a food guide does exist and that obesity has increased.

You tell us that if people want to improve *Canada's Food Guide*, they're welcome to do so. The Guide is just about to be published, so I find it difficult to see how you're going to accept recommendations. As you know, we've heard witnesses with a certain amount of experience in the area of food. One of those witnesses, Dr. Yoni Freedhoff, Medical Director of Ottawa's Bariatric Medical Institute, told us that the first thing his authorized dietician teaches patients is especially to not follow *Canada's Food Guide* recommendations. That's quite a stunning statement! He even told us that the diet recommendations differ radically from the traditional scientific and medical interpretation of the role played by diet in the prevention of chronic diseases, so he couldn't help but wonder whether the information provided was biased or incomplete.

Mr. Bill Jeffery, from the Centre for Science in the Public Interest, spoke about the process that was set up and the list of people who participated in it. He said that some of the advisory committee members might be in a conflict of interest. There were many people from industry, as well as nutritionists from small communities, two of which had fewer than 15,000 inhabitants. The problem was not that they came from small communities but that they were employed full-time elsewhere and that they couldn't make recommendations based on results obtained by organizations with the necessary institutional resources.

I read all of the comments made. Some people say that *Canada's Food Guide* is not tailored to people with low levels of literacy and that it will be difficult for very-low-income families to understand it. Other witnesses have told us that Aboriginals and First Nations were not consulted. They don't see the relevance of *Canada's Food Guide* or how it could be adapted to their communities. So many people have told us that *Canada's Food Guide* should be reviewed and corrected.

You claim to be open to receiving recommendations. Would you be willing to do this before the Guide is released? We're in no hurry. Obesity is not an issue that can be solved in two or three months. Twenty years may be required to set things straight. Are you willing to accept a set of recommendations, before *Canada's Food Guide* is published, from people whose only interest is in helping Canadians eat better?

• (1610)

Ms. Danielle Brulé (Director, Research, Monitoring and Evaluation, Office of Nutrition Policy and Promotion, Department of Health): I'll begin. The first question referred to the impact of the current Guide, which was published in 1992. During the 1990s, I worked on provincial surveys. We worked with all 10 provinces to gather information on what Canadians were consuming. We're talking about adults 18 and over. Using questionnaires, we asked them whether they were familiar with *Canada's Food Guide*. It's very likely that we can refer to that data and see whether people who were aware of the Guide followed its recommendations and what their weight was. With that data, I'll make the link to what Ms. Bennett was saying.

I have here an article from the

[English]

Journal of the American Dietetic Association, "The obesity crisis: don't blame it on the pyramid",

[Translation]

which clearly states that—and I quote:

[English]

Because obesity is such a complex issue, it is overly simplistic to argue that a single educational device such as the Pyramid offers a root cause for the problem.

[Translation]

I'd like to clarify that the article deals with the evaluation of data from a survey that established a link between people with a low body mass index and those who followed American food guide recommendations. The same type of analysis could probably be performed using the data from the provincial surveys that we conducted in the 1990s. We could likely demonstrate that people who follow *Canada's Food Guide* recommendations have a lower body mass index.

•(1615)

Ms. Christiane Gagnon: Would you be willing to work with a team of consultants from various fields who could analyze *Canada's Food Guide* before its scheduled release in 2007? You claim to be willing to accept advice from certain people.

[*English*]

The Chair: Okay, Madam Gagnon.

Please reply very quickly on that question, and then we'll move on.

Ms. Mary Bush: Very quickly, we are at a point where we've gone through an extensive consultation. You've had opinions tabled stating that people didn't feel it was the type of consultation that was needed. At the same time, you need to appreciate many people have had input into this, very well placed, who have had lots to say to us.

I can only say to you that the process that was undertaken has been under way now since 2005. We're just at the final placement of coming out with a food guide. It's something that—

[*Translation*]

Ms. Christiane Gagnon: Mr. Chairman...

[*English*]

The Chair: No, that's okay. I think we got the understanding there.

I'm sorry, your time is gone. You'll have to get back to it in the second round.

Mr. Fletcher.

Mr. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC): Thank you, Mr. Chair.

I'd like to thank the witnesses for coming.

Obviously the food guide has been of interest at the committee, which suggests it is of interest to a lot of Canadians. Having this discussion is valuable because there are concerns that have come up at committee and among those at the table. We also recognize that decisions have to be made in the end anyway. You have to come to a conclusion and put out the best product you can with the input with which you've been provided, and I'm sure that is happening.

I have two questions.

One, why are we revising the food guide? Presumably things that were healthy thirty years ago or healthy twenty years ago are healthy at present and will be healthy in the future.

Also, how does our food guide compare with those of other OECD countries as far as recommended calorie intake, food portions, the food groups, and all those sorts of things are concerned? How does it compare with the United States? How does it compare with the U.K. or France or Australia?

If you could, please answer those questions.

Also, on your website, are there links to those other jurisdictions that allow Canadians to compare the various food guides in different countries?

Ms. Mary Bush: Let me start with the last one. No, there aren't, but it's a very interesting suggestion.

The first question was about why we are revising the food guide. In fact, we didn't enter into that lightly. We actually did a very comprehensive review of the 1992 food guide to assess, one, whether it was still solid in terms of the new dietary reference intake material; and two, whether it was a food guide that was performing to the degree that people understood what its messages were.

We had quite a comprehensive review, and through that review we heard there were many challenges. It was because of the many challenges that people had in understanding; because we had the new work out of the Institute of Medicine, the dietary reference intake work; because there was new science that looks at associating foods, food patterns, chronic disease outcome—for all of those reasons—that we initiated the revision of Canada's Food Guide.

How do we compare to other countries? We look at the food guides of other countries. I've brought a couple of the graphics along with me. We anchor very closely to ask how we compare, say, to the U.S. and their food pyramid. I would say there are many similarities and there are many differences, and I'd like to think we're improving on what other countries have done. We have learned from some of the feedback that has been given around the food patterns that have been issued. That's what is leading us to try to strengthen this particular iteration.

Janet, do you have anything?

Ms. Janet Pronk (Acting Director, Policy and Standard Setting, Office of Nutrition Policy and Promotion, Department of Health): No, I don't. I think you've covered most of the points here. One of the main reasons beyond the scientific aspect was to make sure the messages in the food guide were coherent and ones that people could implement. Certainly, when we reviewed the 1992 food guide, we heard there were many issues associated with that ability to implement the guidance in the 1992 food guide.

•(1620)

Mr. Steven Fletcher: Perhaps you may want to consider that if someone is actually keen enough to go to the website to see the food guide, they may be keen enough to compare Canada's Food Guide with that of other countries, and maybe a comparison can be made on the website. Perhaps this would be helpful and add more flexibility to the understanding Canadians have of the food guide.

Mr. Chair, those are my questions.

The Chair: Okay, thank you very much.

Ms. Keeper, you have five minutes.

Ms. Tina Keeper (Churchill, Lib.): Thank you very much.

I'd like to ask a couple of questions.

One is for Ms. Bush. You mentioned the performance of the food guide, and we heard earlier that there was no sort of effort to monitor the impacts of the food guide. Can you explain to us why that is so?

Ms. Mary Bush: Okay, I think it's a very good question.

Let me go back. It's important for you to know that for over 30 years we didn't even know what Canadians eat in this country. We haven't had the data to tell us what Canadians are eating. In the 2004 Canadian Community Health Survey, we had good data on what Canadians are eating for the first time.

So in terms of assessing the impact or usefulness of a food guide to change behaviour, you ask, what behaviour? The behaviour you're looking at. So what does the food pattern look like? I always say I'm going to be reincarnated on the tobacco file or the physical activity file, because it's so much easier. It's a case of you don't smoke or you do smoke; you're physically active or you're physically inactive.

With the food guide, and with food patterns and food consumption behaviours, and identifying and measuring the impact of the food guide on those behaviours, it's not a quick screener. You're really looking at what is the impact on behaviour and does it change people in a direction that you want to take?

So it's a more complex evaluation. It's not to say there haven't been evaluations undertaken in academia and elsewhere that looked at it and said what and how the food guide performs. We actually undertook this in our review. At the very least, we wanted to know if people understand what the 1992 food guide is saying to them. What is it they're challenged with? And from that, we learned.

Ms. Tina Keeper: Is that when you received the information you referred to in 2004? Was that the point at which you said, okay, something's not working here? The obesity levels are rising in Canadians. Was there a correlation?

Ms. Mary Bush: No. Just to anchor this, the food guide was under review. In January 2004 we said, let's all look at what we've learned from the review, and then let's agree that we need to revise. So that was the timeframe and how this evolved.

For us, the obesity issue is very significant. I would go back to December 2001 when, with Obesity Canada and the Canadian Institutes of Health Research, we held a two-day meeting in Toronto to look at what's going on with obesity and healthy weights. What's causing it? What needs to be done? How do we proceed?

We look at obesity and have a fairly significant interest in understanding it, quite apart from the food guide. For the food guide, we want to make sure that what we're doing is providing guidance that Canadians can follow so they can consume a pattern that's not going to deliver excess energy.

Ms. Tina Keeper: I'd also like to ask you a question around the aboriginal community and obesity, which we've heard again and again is a significant issue, because obesity amongst aboriginal youth is much higher than among Canadian youth. I'd like to ask specifically about the consultation process that is occurring at the moment.

First, can we get a list of who's involved with the consultation process; and also, could you give us a bit of information on the needs assessment that was done?

Ms. Lori Doran (Acting Director, Chronic Disease and Injury Prevention, First Nations and Inuit Health Branch, Department of Health): Okay, sure. We can provide a list of the people who have

been involved. We've engaged people at the needs assessment stage, we've assembled a nine-member advisory group, and we've also gone out to a broader group of stakeholders. We've provided other lists for the main guide process to the department to submit to this committee.

• (1625)

Ms. Tina Keeper: Right, you have that in your thing here.

I'll ask a specific question. Are the nutrient requirements, which seems to be a priority of the food guide, also a priority in the development of the tailored food guide for the aboriginal community?

Ms. Lori Doran: The tailored food guide is based on the same dietary pattern as the main Canada's Food Guide. We don't have sufficient data that a different pattern is required. The pattern, as Mary has pointed out, is based on the dietary reference intakes that apply to all Canadians to ensure that all Canadians consume sufficient nutrients and are at lower risk for chronic disease and obesity.

The Chair: Thank you.

Mr. Batters, you have five minutes.

Mr. Dave Batters (Palliser, CPC): Thank you very much, Mr. Chair.

I'm going to start with a brief preamble and leave a couple of minutes for answers.

First of all, I'd like to thank all the witnesses for coming here to this committee. I'd like to congratulate you and thank you for the great work that you do on this file. This is a mammoth task, and I don't think anyone around this table thinks this is easy. We're simply trying to make some suggestions that will improve the health outcomes of Canadians.

I'll ask my questions all at once and then give you a chance to respond, Ms. Bush, or whoever chooses to respond.

Is this a *fait accompli*? Are you here today and saying that basically it's a done deal, the thing is put together, it's basically ready to go to printing; that this is all very interesting, but the new food guide is put together and ready to go?

I'm going to back up a bit, Mr. Chair, and say to Ms. Brulé that her comment that you can't blame obesity on the pyramid is certainly a point well taken.

If it's not a *fait accompli*, I'd urge you to make it as easy as possible. That's been my comment as the food guide has been brought up. Hopefully this is a user-friendly food guide.

My next question is, could you expand upon how you're going to get the message out? I heard you say something about something for the fridge, which is very fitting. Maybe it could be a pared-down highlights card of the consumer hard copy. Let's be honest, no one is going to read the consumer hard copy if it's any more than four pages long. I would ultimately like to see a laminated card that's double-sided, flashy, and delivers all the messages. That may not be possible, but a highlighted card that could be distributed in a general practitioner's office would be excellent.

How are you going to get the message out? That's my question. I'd urge a massive television campaign, and I think you'd have great success in disseminating the message through that medium.

My final question would be, have you considered having recipe books that comply with the Canada's Food Guide recommendations? Have Canadians submit recipes that might comply. There could be endless recipes, and people could just click on the web or buy it. Now, that's something I'd buy, a recipe book that would comply, but I'm not going to buy the consumer hard copy and go through all the different servings and portions.

Those are my questions. First, is it *fait accompli*? Second, how will you get the message out? Are you considering these helpful ways of getting that message out?

Thank you.

The Chair: I did know he was a good eater, but I didn't know he was a chef.

Ms. Mary Bush: The food guide is never finished until we receive concurrence from the minister, and we are just at that final, moving it through the department, taking a look at it stage. We've got one or two further pieces that we're investigating, but we're quite close. Is it finished? Is it nailed shut? No. Is it almost there? Yes.

To your easy as possible, user-friendly, let's be clear suggestion, one of the things we heard was that eight pages is too long, way too long. One of the things we had to do when we went around to regional meetings, and this is what we went out with, was put it together again properly, because nobody had put it together properly. That's exactly the kind of thing we learned.

Mr. Dave Batters: How many pages are we looking at for the new one?

• (1630)

Ms. Mary Bush: We're not looking at eight pages; I think we're looking at six. So it's a much shorter piece—

Mr. Dave Batters: With a highlight card, maybe?

Ms. Mary Bush: Well, those extensions are exactly what we're looking at right now. Indeed, we're looking at the web as providing us a wonderful opportunity to get very focused.

I'll tell you what the challenge is here. We had a tear sheet in 1992. We went out and did our review. And what did everyone say to us? They said, I don't get it; you just don't give us enough information; and you use words like "moderate", but you don't tell us what it means.

So what we did was take all of that and say we have to be better than this. We have to tell people a little bit more. We heard from

people that they don't know how to even go about putting this together; that they're confused about servings. We've taken all of that into consideration, so that we can make this next cut one that answers all of that.

In terms of TV and extensions, we are, as we speak, looking first at the costs and second at what we can do. And third, part of what we learned from our consultation was that people said, you don't put this on prime time; you don't sell it; you don't move out the message; you have to do a better job. So yes, all of that is part and parcel of what we're looking at right now.

An hon. member: What about recipe books?

Ms. Mary Bush: Recipe books? Actually, we have a communicator-educator piece and a piece on the web that goes a long way to getting a little more specific. We hear all the time, you know your fruit and vegetable recommendations? Who are you trying to kid? Nobody's going to eat that—nobody.

So what we're taking is the next step, which will show you how you could put yourself together over the course of the day to make what we're suggesting as the amount of fruit and vegetables you need to eat. Those extensions are part of what's been built in. I don't think we've gone to recipes.

Ms. Éline De Grandpré: No, not yet, but it's a good idea.

Ms. Mary Bush: But there are wonderful recipe books out there, wonderful cookbooks that do build on all of this kind of...

The Chair: Thank you very much. Your time has gone.

Madame Demers.

[Translation]

Ms. Nicole Demers (Laval, BQ): Thank you, Mr. Chairman. Ms. Bush, I must say that you're good. You are convinced, but I'm not sure whether it's of the right thing.

My recent dealings with Health Canada do not lead me to believe that the department is totally objective. Until now, representatives from Health Canada and the food industry are the only ones saying that the Guide is good. Specialists, physicians and First Nations people, as well as Métis and Inuit groups, have all told us the Guide is not good and that they're not happy with it. You're telling us it can no longer be changed.

The fact that at least four people on your advisory committee are in a conflict of interest—they work for the industry—and that those conflicts are not reported on Health Canada's Web site is of great concern to me. Dr. Barr, Sydney Massey, Sean McPhee and Carolyn O'Brien are in a direct conflict of interest.

I don't believe it's very sensible to have industry representatives on that committee, but since there are some, why didn't you invite national experts, like Jean Pierre Després from Laval University, to balance things out? Why didn't you do that and why didn't you take the advice of physicians and experts? Why are you trusting people who are saying what you want to hear? That worries me a great deal.

Ms. Doran, I would like to have the names of the people you consulted on the part of the document dealing with First Nations and the Inuit. They told us they weren't consulted. We don't believe they're intentionally lying to us. I don't know what's going on.

Thank you.

[*English*]

Ms. Mary Bush: Okay, can I start?

What I'm really wanting to emphasize more than anything else is that everyone you've heard from saw a draft guide that went out for the precise reason that we wanted to hear from people on how this doesn't work. So all of the criticism is based on what went out for consultation and is now being re-looked at.

The second thing is, why did we not go to other experts? I think you need to appreciate that when I look at the experts we went to for the food pattern—and you say Dr. Barr, professor of nutrition at UBC, has a conflict of interest—

• (1635)

Ms. Nicole Demers: Yes, she is a member of the International Dairy Foods Association. She serves on the advisory board for Shaping America's Youth, which is funded by Campbell's Soup, McNeil Nutritionals, Johnson & Johnson, Nike....

[*Translation*]

Do you want more?

[*English*]

Ms. Mary Bush: No, no. I have lots of them here.

Let me take a step back. I would say to you that in terms of our science underpinning this, the Susan Barrs, the Katherine Gray-Donalds, Stan Zeotkin at Sick Kid's, Valerie Tarasuk at U of T.... You're going to actually be seeing Valerie Tarasuk this Thursday. You'll want to ask her about her involvement in this process.

These are people who came to us, who are guiding us not from any vested interest. You're saying to me that they have done research and sit on an advisory board, so they're not objective, but in fact what we're looking for from these people is advice. It's very clear that we do the background, we do the work, we come forward, we take direction and advice. It's not to go back and add another product X or product Y, but rather to say, here's what you need to understand about the science that I understand and the perspective that I bring to the table. It's that range of perspectives that you really want in your advisory committee, and you do it by design, in fact. You do it philosophically, because you want to understand and garner from people a range of perspectives that aren't all aligned with your own.

I can only say to you that in the group that you see here, of the people back there, none of us in this business wants to produce anything but a food guide that meets Canadians' needs, that they understand, and that provides advice that, when followed, will

absolutely provide them with the health and well-being and reduced risk of chronic disease they so deserve.

An earlier comment said that we seem to be preoccupied with nutrient adequacy. We are not. If I leave you with one thought, it is that the chronic disease prevention components of this guide are every bit as important to us as the nutrient adequacy.

You have a couple of options. You either put together a food guide that's going to provide the nutrients that you need to be healthy at a reasonable energy cost so you can maintain a healthy body weight, or you look up at your population and say, very generally, this is sort of what you should eat—have a little bit of this, more of that, and take a vitamin pill. Those are your options. We've chosen to provide a pattern of eating that will meet your nutrient needs, lower your risk of chronic disease, and allow you to enjoy eating from a range of foods and support your own health.

I can only say to you, with everything I am, that the process we've driven and the people who are advising us are there to provide us with a range of opinions so that we understand the various dimensions of this issue and can move forward.

The Chair: Okay, thank you very much. Without the cake and ice cream...that's the problem.

Ms. Davidson.

Ms. Lori Doran: There was a second question.

The Chair: Okay. We're very tight on time, if you can give an answer.

Ms. Lori Doran: I can tell you that the Assembly of First Nations, the Inuit Tapiriit Kanatami, and the Métis Nation Council have been involved at all stages, the needs assessment through to the developmental stages and the consultation stage. With respect, I think Dr. Valerie Gideon, from the Assembly of First Nations, did say they were involved but that they weren't involved in a founding science piece. When questioned, she also said they didn't have the research to put forward a different science base for a pattern specific to the population.

I'd be happy to provide all of the names of the people who have been involved.

The Chair: Thank you very much.

Ms. Davidson is next.

Mrs. Patricia Davidson (Sarnia—Lambton, CPC): Thank you, Mr. Chairman, and thanks to the panel for being here today. Certainly your passion and your knowledge of the subject are very evident.

There were a couple of things I was going to ask, but I think you've just answered them, Ms. Bush. I think Madame Demers asked basically the same question. We'd received a lot of comment on the process and also on the content, but I think you've just made it very clear that the document that everybody up to this point has been commenting on is a draft. Am I correct in understanding that no one outside the department has seen what might be a final draft at this point?

• (1640)

Ms. Mary Bush: That's were we are.

Mrs. Patricia Davidson: Okay. Will there be any other consultation, or do you feel that the consultation is done and that you're now in a position to put together a final document?

Ms. Mary Bush: We're at the end of the consultative phase; we feel that we've done the consultation. You will be getting the details of who's been consulted and how we've gone about this. We are now just at the time of wrapping it up and putting it forward.

Mrs. Patricia Davidson: We talked about the Inuit and Métis. Has there been consideration for other ethnic groups in this guide? I'm not sure we've talked about that today.

Ms. Mary Bush: No, you haven't, and I'm glad you asked.

I'd like to say that it's a very important issue for us. In fact, we did a multicultural needs assessment. One of the first things you learn is that language and pictures are what become important in making the information more relevant to various ethnic groups, so we're looking very carefully at how we could evolve the food guide to make it available in various languages. In the case of the 1992 guide, there were actually groups. One group in Toronto took the 1992 guide and did adaptations with pictures and different languages; I think it's available in about 28 different languages. We'd like to look at a mechanism that would enable us to platform that to a more national availability so that it's not regionally based. We are looking at mechanisms, but right now the food guide is going to be available in English and in French.

However, part of our movement into a web-based platform was to enable us to have graphics that were much more multicultural in terms of food. A bit of it was that the adaptation that allows you to create My Food Guide program allows you to pull culturally relevant foods into the various food groups.

Mrs. Patricia Davidson: I want to ask one more question before I run out of time here. It goes back to the cost of the food basket. I think Dr. Bennett brought up a good point about the cost of milk, for example, in a northern community. I thought you said it was based on the same food basket across the country, the same basics; maybe I heard that incorrectly, but if that's the case, then how do we promote that same food basket when it costs \$5 here and \$50 somewhere else?

Ms. Mary Bush: I'll start the answer by saying that I don't want to leave you with a misunderstanding. What I want you to know is that there is a standard. It's called the nutritious food basket, and it's put together based on the current food guide. It was done post-1992. It's used by people across Canada at the community and provincial levels to cost a basket of food so that you can get some sense, just for the very reason you're identifying, that the cost of food varies across

Canada. If you go north, you know there are enormous costs associated with food—

Mrs. Patricia Davidson: So we know that this basket is going to cost you \$50 somewhere, while it should cost you \$5 somewhere else. Is there a suitable substitute that would be available in this area? Is there something like that built into it?

Ms. Mary Bush: Within the message platform of Canada's Food Guide, we try to provide flexibility so that you have the various food groups and you have a range of foods from which you can select. Indeed, seasonal foods are often much less expensive than out-of-season foods, so there's all that kind of flexibility built in.

But I want to let Lori tell you about the northern food subsidy program.

Ms. Lori Doran: This committee has heard from Fred Hill, from the Department of Indian and Northern Affairs, on the food mail program, which is a program that subsidizes the cost of transporting nutritious perishable foods to northern isolated communities. That program does exist.

The Chair: Mr. Lunney, for five minutes.

Mr. James Lunney (Nanaimo—Alberni, CPC): Thank you very much. It is a very interesting discussion, and I can certainly sympathize with the challenges of trying to manage this file.

We know that Canada has changed a lot. You mentioned in your comments, Ms. Bush, that Canada has changed so much in the years since the food guide was first established.

Dr. Bennett mentioned omega-3. You mentioned folic acid.

Agricultural practices have changed so much today that the food and nutrient content of our foods are perhaps not what they were in our parents' day. The tomato of 1956 was probably not the same as a tomato in 2006 in terms of the nutrient content. When you add to that the complications of travel to the north, many of our food products are picked before they're optimal.

You talked about in-season fruits, which are great when you can get them fresh. But with our transportation today, they are transported great distances. I chose an avocado appetizer the other day, which sounded great on the menu, with tuna and good stuff mixed in with it, but the avocado was so hard it was crunchy. It makes you wonder whether the food value of that is actually what we might have anticipated.

You made reference to the challenge of metering nutrients. I might add to the list—we were talking about calcium—bio-availability challenges with some of the products that are out there. You mentioned eating and then taking a vitamin and mineral supplement. Is there any consideration of recommending to Canadians that they take a vitamin/mineral supplement to augment foods that vary in nutritional value from one place to another, to help meet those nutritional requirements?

●(1645)

Ms. Mary Bush: Thank you for the question.

In terms of the nutrient content of food, I want you to know that I started out my career, more years ago than I care to remember, squeezing tomatoes in a horticultural research institute laboratory where they were actually genetically breeding tomatoes to increase the vitamin C content. So I can tell you the vitamin C content of a tomato varies depending upon whether it rained the day before it was picked. You have to put all of these sorts of nutrient content issues around the food supply into a perspective of how much we know and how much we don't know. There isn't a feeling or evidence that what we need to be doing today is eating our nutrients in a vitamin pill.

Now that I've said that, I can tell you that this particular food pattern that we're putting forward does not meet the vitamin D requirements of those over 50. So that is an issue that will need to be addressed. But I think none of what we heard—I shouldn't say "none", because there are people who say we should simply tell Canadians to take a vitamin pill and then not worry about what it is they're eating, or worry less about what they're eating. In fact, what we tried to do is integrate not only nutrient requirements but a pattern that will reduce risk of chronic disease.

What we hear from people...all anecdotal, I don't know that anybody has done research. My colleagues can correct me if I'm wrong, but very often people will think that if they take a vitamin and mineral supplement they don't have to worry. They think it doesn't matter if they take some cookies and choose to think it's part of their pattern of eating because they've covered it off with a vitamin and mineral supplement. That isn't a sound approach to healthy eating.

Mr. James Lunney: I appreciate that perspective. But the fact is that if you're short on chromium to metabolize sugar, it might help to take a vitamin supplement.

I only have a short time. Can I go on to another subject?

I want to raise this question because you mentioned a very important aspect when you mentioned that part of the purpose of the guide is to ensure that Canadians, in choosing their foods, consume appropriate amounts of energy. That word "energy" is interesting, and I wanted to pick up on a submission by Dr. Yoni Freedhoff of the Bariatric Medical Institute here in Ottawa. He raises that question and quotes the Chief Medical Officer of Health of Ontario. He talks about energy and says body weight is a relationship between energy in and energy out. The energy is, of course, measured in calories, not foods. Yet the food guide has a habit of explicitly instructing us to follow the food guide to make healthy food choices and maintain healthy weight.

To follow through on that, he says, "The proposed revision to Canada's Food Guide provides zero guidance on calories, aside from vague..." what he characterizes as utterly useless statements like, "Try not to eat too much, or more or less." He is saying that by failing to provide guidance on calories, Health Canada puts Canadians at dramatic disadvantage in managing their weights.

How do you respond to that criticism?

●(1650)

Ms. Mary Bush: It is a perspective that I know has been expressed by him, and it is a perspective that isn't shared widely by others. We take this very seriously. We don't just casually say we don't agree with something. We are very careful about this.

I can take tell you that we've actually met with the scientific director of the Canadian Obesity Network, Dr. Sharma. We asked him whether he thought we should be talking about calories. His answer was no.

We went right across this country for our consultations. We didn't just ask if they liked the pictures. We had a whole section on energy. It is such an important issue. We asked if we were adequately dealing with energy, if there was something we needed to do better. The overwhelming response was that what we were doing was very important, and they wanted us to do what we do better. Not many people talked about counting calories.

Did we hear it? Yes. There are opinions as wide as this room on every element in this food guide. What one needs to do is look for evidence that underpins the guide. You go to the experts and garner their input. Then you go through and make a decision on how to proceed.

Ms. Ruby Dhalla: I want to build on what you said about there being a wide variety of opinions. In a consultation process people are always going to look at things through their own lens.

I think Dave said it best earlier. We've had a chance to hear from a number of witnesses, a number of stakeholders. If you take a look at the transcripts, you will realize that every single person who came forward as a witness on this topic stated time and again that they felt they were not consulted. This is what my two colleagues, Madam Demers and Madam Gagnon, told us as well.

You've spoken today with a tremendous amount of passion. I really appreciate that, and I think all the other members do as well. I'm sure it's been an onerous process. But we as the health committee are trying to ensure that this is the best possible food guide. We want the food guide to be used by Canadians from different socio-economic and cultural backgrounds. We want it to have an impact on reducing obesity in the country.

Your version of the consultations is vastly different from the versions that other witnesses have given us. Some of the groups you spoke of, like Dr. Gideon from the AFN, were consulted. A few of the witnesses have said they were consulted, but they have all stated that they were consulted not on the substance part of it, not in terms of content, but on what the diagrams and pictures should look like. Yes, packaging is an important part of it, but these organizations are concerned about the substance, because they are catering to their particular demographic.

Could you clarify this for us?

Secondly, my colleague Ms. Davidson asked you whether this was a draft of the food guide. I'm a little confused, because in your presentation you said it was going up to the minister—there were a few things that needed tweaking, but it was a done deal. Based on what Madam Gagnon said, if we have recommendations, will they be incorporated in the final document?

Last but not least, can we as a health committee get a copy of the food guide in its draft form?

Ms. Mary Bush: Let me tell you that the draft on which you heard testimony was a draft that went out for consultation. There's a resemblance to what will come out finally, but it has been improved by taking what we heard in consultation and improving it.

When the comments are made about substance versus packaging, I want you to know—

Ms. Ruby Dhalla: That's their description of the consultations, of what's happening.

Ms. Mary Bush: I know, I've read the transcripts.

Let me tell you we care passionately about substance. Anyone who cares, in replying to the consultation where we go through and ask specific things, yes, about the packaging of the information, but also about how we're dealing with energy, which should be a very important issue for this committee, because we spent extensive time in consultation asking for input on how we had dealt with the energy balance issue and how we could improve it.... We also ended our consultation with the question, is there anything else you would care to comment on to Health Canada about this initiative? We're here waiting, and wanting, and ready to receive that input. So if somebody had said to us, you know, I think you've missed it, you've got way too many fruits and vegetables, or too few, or as we heard in consultation, they comment that they don't think where we've gone with fruits and vegetables is right....

•(1655)

Ms. Ruby Dhalla: Were those consultations invited in terms of substance? Was it just a general question, please comment and let me know what you think? Was that the general question, or was it, what do you think in terms of the substance of fruit and vegetables, or poultry?

Ms. Mary Bush: We went through every food group and asked questions on every food group. In terms of whether there was detailed, substantive questioning, my answer to you is no. It's not because we're not interested in that, but rather, what are you going to ask? I say that with respect, because in fact we spent a fair amount of time.... From my perspective, what I wanted was an opportunity to hear from anyone who cared to tell us that they thought we hadn't done this well. Tell us.

Ms. Ruby Dhalla: We're running out of time—

The Chair: No, you are out of time.

Ms. Ruby Dhalla: Can we just get the draft of the guidelines?

The Chair: Thank you very much. I don't think we're going to get an answer on that one.

Mr. Batters.

Do you have an answer to that? Okay, we'll have a quick answer here, and then we'll get to Mr. Batters.

Ms. Danielle Brulé: Very quickly, at the November 2005 consultation, we did present the protocol that we used to come up with the pattern, so there was content, and we explained what the model was that we used, how we proceeded to come up with our food guide pattern.

Ms. Ruby Dhalla: Can we get the draft of the guidelines for the health committee?

The Chair: No, I'm sorry, your time is up.

Mr. Fletcher.

Mr. Steven Fletcher: Just briefly, Mr. Chair, I'd like to thank again the witnesses.

We often have stereotypes of the civil service, and for the record, I would just like to say that I am very impressed with the panel, particularly, Ms. Bush, with your passion. I want the transcript to reflect that you obviously believe in what you're doing. Your hand gestures and your articulation of the principles and the motivation behind this are really inspiring. You all serve your country well, and thank you for that. I'm going out to eat a carrot after this meeting.

The Chair: Thank you.

Mr. Batters.

Mr. Dave Batters: Mr. Chair, thank you.

We are all feeling the passion in this meeting here today.

I have a question. We're at the point now where it's almost a *fait accompli*, but not quite. I wonder if you could, for the benefit of the committee, walk us through where it goes from here. Exactly what steps do you have to take from where you are right now until the consumer hard copy or my beloved laminated two-sided card is available for the public? Exactly what has to happen and who has to make these approvals? Ms. Dhalla is asking for the draft, what you have in front of you.

I understand that eventually we have to have a finished product here. You can have paralysis by analysis, you can go through this ad nauseam, and you've gone through it quite a bit here. Eventually we have to print something. So what is the process until we have a finished product? And is there any kind of, here's what we've come up with after all this consultation, and it's thumbs up or thumbs down? How does this work?

Thanks, Ms. Bush.

Ms. Mary Bush: Right now, the food guide is not finished until final concurrence is given by the Minister of Health to the product and its content. That's where we are; we're moving through right now. It's not there, but that's part of the process. Once that happens, we move immediately into production. Production will involve making hard copies of the consumer piece—

• (1700)

Mr. Dave Batters: I understand, but I'm going to stop you there, Ms. Bush.

You're telling me that it's almost ready to go to the minister. Who has to see it before it goes to the minister?

Ms. Mary Bush: It goes throughout the chain, right from the deputy minister to the assistant minister down to us.

Mr. Dave Batters: Where are we in the chain right now?

Ms. Mary Bush: Not even out of our office.

Mr. Dave Batters: So if someone thinks you've missed the boat a little bit in certain areas, there are some opportunities for adjustments, then.

Ms. Mary Bush: I would only say to you that lots of people thought we missed pieces. That's what the consultation process was. So we've got that.

Mr. Dave Batters: I think you know where I'm going, though.

Ms. Mary Bush: Yes, I know where you're going. I'm just saying that it's not—

Mr. Dave Batters: The finished product that you have right now still has to go through a few processes before it goes to Mr. Clement and before it's signed off on.

Ms. Mary Bush: Within the department; it's all within the department.

Mr. Dave Batters: So it goes through the department, it goes to the minister, and it's a done deal. There's no more public consultation, then, on this document.

Ms. Mary Bush: There's no more public consultation planned, no.

Mr. Dave Batters: You're not going to be back here at committee with your draft this year?

Ms. Mary Bush: Do you know what I would love to do? I would love to return to this committee when this food guide comes out, lay it out to you, and have you look at it and tell us whether or not you think we've done what needs to be done.

You say it's too late. In one sense, you're right. In 2007 we'll be here with the food guide. But there is always opportunity.

I can tell you, I go through the transcripts of what has happened here. From that, I'm going to say two things to you.

First, nobody you have heard from has seen where we have gone with this food guide. That's part of the process: you go out, you consult, you get the input, you evolve. You had the Nunavut food guide in your hand. One of the important things for you to know is that the very person who was involved in that is the person who Lori has working on the first nation and Inuit food guide.

We had a question on the multicultural evolutions to the food guide, or first nations, and the answer was that we don't have data. Let me tell you that the University of Toronto's Dr. George Beaton, who has been a rock in getting us started on this process and going through our protocols, said at the beginning that our first decision had to be whether we would look at creating new, *de novo*, food patterns, because if so—and when I say “new” food patterns, I mean based on the ethnic pattern that is followed, or the first nation and Inuit—we needed data. We needed data on what those people were eating or we couldn't do it.

So this is an imperfect solution when you come out with a food guide and you evolve it for a particular cultural group, because you're taking a food pattern developed for Canadians that's based on the food supply, what Canadians eat, their nutrient needs, and chronic disease prevention. You're asking those people who maybe have come from Thailand, who have a different pattern of eating, to face a pattern that was developed for the Canadian moment.

Somebody—I think it was Mr. Fletcher—made the suggestion that we have a link to all of these other food guides. I think it's a wonderful idea.

The Canadian food guide will be a food guide that is rooted in Canadian foods, in the traditional pattern that we have data on, because that's the only thing we can use. If we don't have data on what people are eating, we can't develop a *de novo* pattern.

The Chair: Ms. Brulé, very quickly.

Ms. Danielle Brulé: I'd like to mention this very quickly, because I think it's a concern for people.

We said that the food guide would be coming out shortly, but I think we also said that we are committed to going back to Canadians to provide more messages. One of the pieces might very well be the children. We're prepared to provide supporting material that will be targeted to children.

So your recommendations, if they come, would not be lost. They would be accepted. We would incorporate them in future materials, because we are committed to going back to Canadians.

The Chair: Thank you very much.

Madame Gagnon.

[*Translation*]

Ms. Christiane Gagnon: Ms. Bush, you're definitely tough and your defence of the *Food Guide's* relevance is well put together, but I still have one question.

You've said that the individuals we named were consulted at the beginning of the draft stage of the process. They critiqued certain things and gave their advice on the matter.

Those people feel frustrated because their advice and criticisms were not taken into account, since they went against your interpretation. If I consult people and don't take their advice, I criticize them and tell them they're headed in the wrong direction.

One of the shortcomings identified by the Canadian Journal of Dietetic Practice and Research is that 25% of foods eaten are not included in *Canada's Food Guide*.

Is it true that there's another food category? This is important because we eat a lot of foods that could be bad for our health and are not included in *Canada's Food Guide*.

Furthermore, with regards to the committee's report, you are here today because I tabled a motion and wanted to obtain a copy of all of the deliberations.

Are you able to provide the committee with the report on the advice given by the various experts? In my view, the list of witnesses that was provided to us raises doubts about the objectivity of the food industry representatives, who may not have all they need to be considered experts, as Ms. Doran was saying.

Personally, I have a few doubts. Can you give us the evidence on which you based your decisions with regard to *Canada's Food Guide*? And could you provide us with a copy? Are you willing to print all your recommendations? Perhaps they're already printed by now and changes aren't even possible. Why aren't you providing the committee with a copy?

You've defended the Guide and you claim that it is good. If what you're saying is true and you've taken the important advice, those who've critiqued the Guide will say that you listened to them. However, I don't expect to see what these critics were saying included in the Guide when it comes out.

Are you telling us that we're completely off the mark and that we've perhaps heard too many unfounded criticisms of the implementation of *Canada's Food Guide*?

• (1705)

[English]

Ms. Mary Bush: I'll start with the last.

I can categorically tell you that when this food guide comes out there will be criticism, because this is such a complex file with such diverging views. There will be criticism because it's impossible to meet everyone's needs.

But I'm so glad you asked this question, because when you said... but you would be frustrated too, if you had opinions and those opinions weren't listened to. That's the crux of this issue. No one you've heard from knows whether we've listened to what they had to say or not because no one has seen what we've done with the consultation evidence that's come to us. I can sit before you and say categorically that there was nothing said to us that wasn't carefully considered.

You asked about energy, the 25% from foods that are outside the food guide. The chairman himself said he didn't like our food guide because we weren't going to be providing him with ice cream, cake, and cookies—and he's right. Those are foods, and that's the challenge. And one of the challenges you people have is that we all live in a society that has so evolved in terms of its food supply that you can't even go to Home Hardware without running into food. It is omnipresent—365, 24/7. And the food guide is trying to make its way in to tell you that healthy eating means changes in what you're eating.

As for the recommendations and the advisory committee minutes, we've already brought forward all of those. We saw that you wanted

them; we've put them forward. They're out of our office and into the department to come to you so that you can see precisely who said what about what, and what it looks like. It will be there.

On the issue of bringing you a copy, I can say only that your request goes to the Minister of Health. It's not mine to bring. It's not mine to say yes; it's not mine to say no. You're tabling that you would like to see a copy, and it's beyond the authority of this table here to say yea or nay, because it's not part of the process that's under way. That's a decision for the department to make.

• (1710)

The Chair: That's fine.

Thank you very much. I think we understand that.

Your time is gone.

[Translation]

Ms. Christiane Gagnon: Mr. Chairman, she didn't answer my question on the 25% of foods that are...

[English]

The Chair: We can have a very quick comment on the 25% of foods that are not included.

[Translation]

Ms. Christiane Gagnon: ...with regards to ice cream, for example.

[English]

The Chair: You don't have....?

Ms. Mary Bush: No, I'm just saying that the issue is very dead-on. Canadians consume a large percentage of their energy—22% for ages 4 to 18, that we know from CCHS 2.2—from foods that aren't part of your basic food supply. I will repeat what I said earlier. This food guide is talking about tough choices. We're talking about breads and cereals. We're not talking about croissants and muffins, because you can walk into almost any place on your way home tonight and pick up a muffin the size of a piece of cake and probably has that much fat and calories.

We're talking about making some very real choices here.

The Chair: Thank you very much.

Ms. Dhalla, you have five minutes.

Ms. Ruby Dhalla: Mary, as I think my colleague Mr. Fletcher mentioned, we admire your passion. You have done a lot of work on it, and it's coming across as you answer all of our questions.

Once again, I do want to reiterate that we are trying to convey, and perhaps we are the messengers in this case, what we have heard from a number of stakeholders. They feel not that their suggestions have not been implemented—because none of us has seen the final food guide that will come out, and neither have they—but that they are frustrated with the type of consultation that was done, which was not on substance. You have given a couple of examples, in your answers, about the energy, the sodium and the salt content, but the frustration of stakeholders has been with the fact that they were not consulted on the substance of the issue. Their frustration has been with the type of consultation to which they were invited, despite their particular area of expertise.

I just want to have three questions answered very quickly.

First, you have no hesitation in putting forward to this committee and tabling a draft copy of the food guide? That's the first question. If you have forwarded it to the minister, are you okay with the committee's having a preview of it? That's the first question.

Second, we've asked for a list of the individuals who were invited for consultation, i.e., stakeholders, organizations, or individuals.

Third, could you forward to the committee both the type of questions, the nature of questions that they were asked or consulted on, and their responses and submissions?

You initially mentioned in November 2005 that you had forwarded information with regard to the food guide, which I assume would be at the pre-consultation stage. Could we perhaps have that tabled once again and then, after consultation, see what the food guide, which is in draft at the moment, looks like?

Ms. Mary Bush: Your last point was to table what?

Ms. Ruby Dhalla: You mentioned that you had forwarded a copy of some documents, I believe to this committee but I wasn't sure to whom—you said a number of individuals—in November 2005, which were draft copies of the food guide?

Ms. Mary Bush: That was a part of our consultation. In fact, we had an online consultation, which was also supported by regional meetings.

Ms. Ruby Dhalla: Wonderful. Could we have that tabled again along with your post-consultation draft guide?

Ms. Mary Bush: Okay. You've asked for that, and it's on its way, because it's left out—

Ms. Ruby Dhalla: Do you have any hesitation about the minister's forwarding of it to this committee?

Ms. Mary Bush: I would say this. We are on a very tight timeframe.

An hon. member: Why?

Ms. Mary Bush: Why? The issue is very much that this has been under way. We are being asked regularly for it.

I would just like to tip the balance here a little here in terms of consultation and what you've heard. I used the sodium example earlier, and I'll repeat it. Sodium—

• (1715)

Ms. Ruby Dhalla: Is there another good example? Is there anything else that perhaps you could enlighten the committee on in terms of a different example, aside from energy? We've heard that. Is there anything else?

Ms. Mary Bush: Help me, guys. Is there another piece here?

We heard that we weren't doing a good enough job at giving direction to Canadians around their choice of fats—here's a good one, their choice of fats. We heard that, we've gone back, we've really tightened that up, and we've really gone through a comprehensive process that has actually allowed people who care about this to speak to us about what they care about.

We've listened. We've taken the next step. We're ready to go forward. You've had a few people come to this committee who had said this consultation didn't work for them. There was nothing stopping any one of them from going, pen to paper, to us with what they felt about any aspect of this food guide—and indeed, we had many people who did. So people who care about this process, people who wanted to say something to this department, had all kinds of opportunity to do so. It was up to people to take that up and execute it.

When I look down at what we were preparing for you to come forward, I see hundreds of people who were consulted on this, hundreds of people with whom we actually met physically. We did more outreach on this consultation than we've done in the history of the food guide, going province to province, place to place, and enabling people, in online consultation, to input to us. So without a moment's pause or hesitation, I'm sorry if there are people who felt that it didn't work for them, but there are many people who provided us with very rigorous and solid input, which we are greatly appreciative of.

The Chair: Thank you very much.

Mr. Lunney.

Mr. James Lunney: Thank you, Mr. Chair.

I'm glad that you mentioned that example, following Dr. Dhalla's question about whether there was anything else. You went from sodium to energy to fats, and that's where I want to ask a question.

This is from our friend Dr. Freedhoff. You didn't seem to agree with his opinion, but he's currently attending the Obesity Society annual meeting in Boston, and he asked Dr. Walter Willett, who is the chairman of the department of nutrition at Harvard School of Public Health, to review the document.

One of his comments that came in an e-mail directed just yesterday from the society meeting was this, and it relates to fats, "Like the U.S. guidelines, the draft Canadian document is still fat phobic. There's a suggestion to use a very limited amount of vegetable oils, but there are recommendations to reduce or avoid fat in general, when it's really trans fat and partially hydrogenated food that should be totally avoided, and saturated fat that should be limited. The main message should be to replace trans and saturated fat with unsaturated fat."

So as much as you've heard from people about fats, did this consideration work its way into the final draft?

Ms. Mary Bush: Absolutely. I can say that, absolutely. I actually reviewed what you received, and I thought, isn't this interesting? There is nothing here that's a surprise. There's nothing here that would cause me a moment's pause.

Part of this is how one puts this all together. Let me just give you two examples, because the fat phobic comment is really something where I can tell you categorically that what we know is that it's the type of fat that really matters for cardiovascular disease. Fat, in terms of what it contributes to the diet, also contributes a lot of energy, so it's an important piece in terms of caloric management.

Mr. James Lunney: They're not all bad.

Ms. Mary Bush: Absolutely, they're not all bad, which is why we actually have an amount of essential fatty acids, and fats and oils, included in our pattern. But when we focus on fat and reduced fat in dairy and meat, what we're doing is attacking saturated fat. That's what that's about.

When we go into grain products and we focus on foods that are low in fat in grain products, that's directly on the trans fats.

It's not that we're not using these words. In fact, one of the things we do is take advantage of one of the most important public health tools this country has created, in the form of the nutrition facts panel on all foods. We say it's important when you're choosing foods. The quality of foods and the energy that your foods bring is absolutely essential. So what you do is look at your food label and take seriously saturated fat and trans fat.

• (1720)

Mr. James Lunney: Thank you. I'm glad to hear that's included.

I have one last question here, while I still have a moment.

There is another issue he raised, which you'd probably be aware of since you've seen the document. That is the issue related to high dairy intake. He's concerned that we're still recommending fairly high dairy intake in the draft that he saw. He said, "It would not be a major issue if it were clearly safe; however, the U.S. guidelines completely ignored a very substantial body of data showing increased risk of aggressive and fatal prostate cancer with high dairy consumption. Also, studies have found increased risks of ovarian cancer with high dairy consumption."

Have we addressed the high dairy recommendations that were in the draft document?

Ms. Mary Bush: Let me start, and Danielle can pick up on this, because I found it very interesting. I actually asked what's high? What exactly is high?

Mr. James Lunney: I think he said three glasses a day.

Ms. Mary Bush: Three glasses a day. I would actually then say to you that I went back to our nutritional epidemiologist, who has done work on looking at the relationship between chronic disease and health outcomes. We actually went through what was said in the two major reports that we looked at. What has happened and been said since then, and what are the real risks?

This is where you have to weigh the risks. You weigh the risks of potentially evolving evidence around prostate cancer and ovarian cancer. You certainly never want to put out a pattern of eating that's going to increase the risks. You weigh it against the need for nutrients that are brought to you by some of the foodstuff.

We actually had somebody go through to do a review this morning, based on those quick notes that came to us. I feel very confident that the pattern we're putting forward absolutely does not create a risk for either of those diseases.

Mr. James Lunney: On the concern you raised on the three glasses a day, following the perspective study, a 25% increase in ovarian cancer, with a lactose intake equivalent of three glasses of milk per day, might be of concern to us. You could maybe get the calcium from another source, if that's what we're looking for in milk.

Ms. Mary Bush: Thank you.

The Chair: Mr. Fletcher.

Mr. Steven Fletcher: Thanks, Mr. Chair.

I'd like to make a comment on Ms. Dhalla's suggestion.

I think we have to be careful in that there's the old saying that a camel is a racehorse designed by committee. I would be concerned we could end up with a food guide that has more pages than the Library of Parliament if we bring it to committee.

As a government, we have delegated the responsibility to Health Canada to produce this guide. I'm not necessarily opposed, but I am concerned about what could happen if we tabled a guide and then tried to come up with a guide ourselves. My goodness, can you even imagine what those meetings would be like?

I only want to make sure everyone understands that concern. Perhaps there are other ways to meet your concern but also meet the objective of getting a food guide out in a timely manner.

Thank you very much.

The Chair: Thank you.

Madam Gagnon.

[Translation]

Ms. Christiane Gagnon: I'd like to ask two short questions. First, I'd like to know the cost of *Canada's Food Guide*.

Second, Ms. Bush, you told us that you used the body mass index to determine a person's degree of obesity.

Shouldn't we be using waist size to determine whether someone is obese or not? That's what Dr. Després says, and he's an expert in the field.

You see that my questions are short.

• (1725)

[English]

Ms. Mary Bush: Thank you. In our office, we actually developed the guidelines that define BMI and the importance of waist circumference as a measure, because it certainly is central adiposity that increases risk.

The issue of BMI was simply to say to you that the energy requirement formulas are driven by height and weight and activity. In order to make sure the pattern of eating that we were providing did not provide more energy than one could term appropriate, we used the BMI of the mid-point of a normal weight with the measured heights from the CCHS data that relate to Canadians in order to anchor ourselves and just be sure that the energy that's being delivered is not excessive.

I would also say to you that the energy being delivered absolutely depends on what's chosen. And to the comment that you can't ignore ketchup, it's absolutely right that you can't ignore ketchup. You need to be able to look at the pattern and say that by following this pattern, with modest amounts of condiments, we'll say, you're going to be anchored in a pattern that's not going to contribute to excess energy. Now that I've said that, if you start pouring sauces on everything you eat, that's excess energy.

The Chair: Thank you.

We have time for—

[Translation]

Ms. Christiane Gagnon: What about the cost of *Canada's Food Guide*?

[English]

Ms. Mary Bush: *Le coût*, yes. Cost is a tricky question. I can tell you what it's going to cost to print it. We're going to print four million copies, at a cost of \$200,000. But that cost is the cost of the paper and printing, that's not—

[Translation]

Ms. Christiane Gagnon: Yes, but how much did the research and everything associated with it cost? In other words, what is the overall cost?

[English]

Ms. Mary Bush: Absolutely. I think it's a very good question. We'll get you that information. I don't have that with me.

[Translation]

Ms. Christiane Gagnon: Good. Thank you.

[English]

The Chair: Thank you very much.

We have time for just one quick question and one quick answer, and we'll ask Ms. Bennett if she'll—

Hon. Carolyn Bennett: As I went across the country, it was very clear that there was terrific work being done in the multicultural communities across this country. A number of different places would proudly show us what they've translated into Portuguese, into Punjabi, into whatever. Is there not a role for Health Canada to be the clearing house for these, so that small community groups, CACs, don't have to do that themselves? I also think some of the terrific nutritionists on the ground would have also adapted it to a Chinese diet, to an Indian diet, to these kinds of things.

So it seems that we're still taking 1957 approaches to this for our multicultural society when, on the web, having people able to download these things in twenty languages seems more appropriate for the populations that are most at risk.

Ms. Mary Bush: I couldn't agree with you more. In fact, that is what we're looking at in terms of making many languages available on the website. The issue is not that we don't think it should be.

Hon. Carolyn Bennett: But in the clearing house piece, have you asked people to send in what they're already doing, like the Nunavut one, which I think is probably one of the best ones?

Ms. Mary Bush: Yes. As I said, we have a collection of about 26 different languages and adaptations that already exist on the 1992 food guide. So absolutely, we collect them, we're interested in them, and we dialogue with them.

The next question is why, when we come out with the 2007, we cannot get some of those linguistic characteristics available to those people so that every little community doesn't have to do it. We're investigating that as we speak, because we agree with you. It's a very important piece.

The Chair: Thank you very much for your second presentation and testimony before the committee.

The time has gone. You've been very passionate about this. The questions were excellent, and the answers equally so.

The meeting is adjourned.

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