

**Ontario Collaborative Group on Healthy Eating and Physical Activity (OCGHEPA)
Advocacy Subcommittee
Submission to the Ministry of Finance
February 13, 2015**

OCGHEPA – A Comprehensive and Collaborative Approach

The OCGHEPA is a provincial collaboration of health professionals from organizations dedicated to addressing population-based issues related to healthy eating and physical activity. Through aligning our health promotion efforts, the OCGHEPA ensures that a systems approach is taken in order to ensure that recommendations and action are comprehensive and inclusive.

Summary of OCGHEPA Recommendations

To further advance healthy eating and active living in Ontario, the OCGHEPA submits the following recommendations for consideration by the Ministry of Finance:

- Adopt a “Health in All Policies” approach to ensure that healthy eating and physical activity initiatives are a priority for all ministries.
- Support the implementation of recommendations from the [Ontario Food and Nutrition Strategy](#) and the Healthy Kids Panel with staffing and resourcing that will ensure cross-ministry and cross-sector collaboration and a strong voice within government to move these strategies, recommendations and outcomes forward.
- Improve access to quality physical activity and food education opportunities for children at school and in the community.
- Create or revitalize built and social environments in which we live, work and play to support and encourage healthy eating and active living.
- Monitor and evaluate programs, policies and strategies to improve health and reduce health inequities and work on further execution of the provincial poverty reduction strategy.

Government Opportunity: Align Provincial Budget with Provincial Needs

The [Drummond](#) report has highlighted the need for increased health promotion as vital to saving health care dollars.¹ Health care costs are projected to reach 70 per cent of the provincial budget by 2022 and 80 per cent by 2030.² In Ontario, in 2009, it was calculated that the economic burden of physical inactivity was \$3.4 billion while the burden associated with obesity was \$4.5 billion.³ With 25 per cent of health care costs due to preventable illnesses, the government must consciously recognize that now is the time to invest in a healthier Ontario.⁴

Influencing societal lifestyle behaviours is the key to Ontario becoming the healthiest province in Canada. A large number of chronic diseases such as cancer, type 2 diabetes, heart disease and stroke, can be prevented through lifestyle changes through healthy public policies. Chronic disease prevention should be at the forefront of provincial budget considerations across the country. Obesity is a case in point, which is becoming as big a threat to health as tobacco.⁵ Over 60 per cent of Ontario adults are overweight or obese. More concerning, 27 per cent of Ontario children and youth aged 2 to 17 are overweight or obese.⁶ Only 15 per cent of adults achieve the minimum recommended amount of 150 minutes of moderate-to-vigorous intensity physical

¹ Commission on the Reform of Ontario’s Public Service. Public Services for Ontarians: A Path to Sustainability and Excellence. February 2012. <http://www.fin.gov.on.ca/en/reformcommission/chapters/report.pdf>

² George Zegarac, Food and Health – Advancing the Policy Agenda, 2010 http://blogs.ivey.ca/agri-food/files/2010/07/5500-2_food_and_health-report.pdf

³ Health and Fitness Journal of Canada, ISSN 1920-6216, Vol 4, No. 4. December 30, 2011. <http://www.healthandfitnessjournalofcanada.com/index.php/html/article/view/112/78>

⁴ Ministry of Health and Long-Term Care. Ontario’s Action Plan for Health Care: Better patient care through better value from our health care dollars. January, 2012. http://www.health.gov.on.ca/en/ms/ecfa/healthy_change/docs/rep_healthychange.pdf

⁵ Haomiao Jai Phd, Erica I. Lubetkin, MD, MPH “Trends in Quality-Adjusted Life-Years Lost Contributed by Smoking and Obesity, *American Journal of Preventive Medicine*, Feb. 2010, 138-144.

⁶ Shields M. Measured obesity. Overweight Canadian children and adolescents. In: Nutrition: findings from the Canadian Community Health Survey 2004; Issue 1 (cat no 82-620-MWE2005001). Available from: <http://www.statcan.gc.ca/pub/82-620-m/2005001/pdf/4193660-eng.pdf>

activity per week.⁷ Young people fare even worse with just 7 per cent of those aged 5 to 17 attaining the minimum level of physical activity each day.⁸ To tackle these challenges proactively, the Government of Ontario must invest in cost-effective strategies that address the social, cultural and environmental factors influencing poor diet and physical inactivity levels that are responsible for substantial health risks for Ontarians.

In the recently announced [Patients First: Action Plan for Health Care](#), the Government has reaffirmed commitments made in the [Action Plan for Health Care in Ontario](#) 2012, to promoting healthy behaviours and supporting lifestyle changes in order to improve health outcomes for Ontarians. To achieve these goals, there is an urgent need for Ontario to take action on the recommendations put forward by experts and stakeholders, such as those in the [Ontario Food and Nutrition Strategy](#)⁹ and the [Healthy Kids Panel](#)¹⁰, in order to set clear goals and measurable targets for health that should be as ambitious as other leading jurisdictions.¹¹

OCGHEPA Recommendations - Background

Adopt a “Health in All Policies” approach to ensure that healthy eating and physical activity initiatives are a priority for all ministries.

Ontario must not lose sight of the imminent need to address the need to improve the health of citizens through a comprehensive, whole of government approach as was noted by the Institute for Clinical Evaluation Sciences (ICES) back in 2009. Through government priorities being integrated with health initiatives, improving the health of all Ontarians can be maintained as the number one priority while still focusing on reducing health care costs.

In order to help achieve the target for childhood obesity reduction of 20 per cent in 5 years (by 2017) as set out by government in its *Ontario Action Plan for Health Care* in 2012, a health in all policies approach must be taken with a commitment to working collaboratively with partners and stakeholders. It is vital that all factors contributing to childhood obesity are addressed, including but not limited to, access to healthy food and physical activity, food and built environment, eating and active living behaviours, social determinants of health, parenting practices, restrictions on advertising and promotions of unhealthy foods.

It is important that funding be dedicated to address the childhood obesity reduction effort specifically and not get rolled into other government initiatives, without clear indicators and tools to track success or progress. For example, in the 2008/2009 budget, Ontario made a commitment of \$10 million annually over three years to address childhood obesity in Ontario – an investment that had the potential to have a significant impact on providing Ontario’s children with the supportive environments necessary to live healthier lives. However, Ontario’s After-School Initiative received the funds that were allocated toward childhood obesity and shifted the focus to achieve a number of other government priorities, including providing supportive environments for children living in communities with high risk poverty levels. The After School program was expanded in 2012 as part of [Ontario’s Youth Action Plan](#) to reach more targeted communities.

⁷ Statistics Canada, Canada Health Measures Survey – Physical Activity of Canadian Adults , 2011
www.statcan.gc.ca/pub/82-003-x/2011001/article/11396-eng.htm

⁸ Ibid.

⁹ Ontario Collaborative Group on Healthy Eating and Physical Activity, Ontario Food and Nutrition Strategy, October 2014. Available at: <http://sustainontario.com/work/ofns/the-strategy/>

¹⁰ Ontario Ministry of Health and Long Term Care – No Time to Wait – Healthy Kids Strategy, March 4, 2013. Available from:

http://www.health.gov.on.ca/en/common/ministry/publications/reports/healthy_kids/healthy_kids.pdf

¹¹ Institute for Clinical Evaluative Sciences. What does it take to make a healthy province? A benchmark study of jurisdictions in Canada and around the world with the highest levels of health and the best health behaviours. Nov 2009. www.ices.on.ca/file/Healthy%20province%20November%20release.pdf

While OCGHEPA commends the government for moving forward with the after-school program to focus on high-need populations, the program should be expanded so that all Ontario children have access to quality after-school programming regardless of the community in which they live. The Healthy Kids Panel recommendation B.3 asks for a commitment of at least \$80 million per year in new funding to reduce childhood overweight and obesity. It is important that funding be dedicated to address specifically the childhood obesity reduction effort and not get rolled into other government initiatives, without clear indicators and tools to track success.

The government's commitment to develop a health and wellness strategy that emphasizes community wellness and a culture of health presents a perfect opportunity to put a "health in all policies" approach into action. Healthy eating and physical activity should be critical components of this new strategy, and policies and programs will need to be aligned across ministries to cultivate a culture of wellness at the population level and to develop an environment that supports and encourages healthy choices. Such a strategy should be developed in conjunction with key stakeholders and will need to be appropriately resourced to be effective.

Support the implementation of recommendations from the [Ontario Food and Nutrition Strategy](#) and the Healthy Kids Panel with staffing and resourcing that will ensure cross-ministry and cross-sector collaboration and a strong voice within government to move these strategies, recommendations and outcomes forward.

The OCGHEPA and the Ontario Food and Nutrition Strategy Design Team remain committed to advancing the [Ontario Food and Nutrition Strategy](#) (OFNS)¹². The goals of the OFNS are to promote health through healthy eating and access to healthful food for all Ontarians, to reduce the burden of obesity and chronic disease on Ontarians and the Ontario health care system, and to strengthen the Ontario economy and environment through a diverse, healthy and resilient food system. The OFNS strategy is intended to work across government fostering an inter-ministerial approach.

The OFNS Design Team has shared development progress with many stakeholders and government ministries such as Health and Long-Term Care, Children and Youth Services, Education, Agriculture, Food and Rural Affairs, and the response has been very positive and encouraging with the various ministries being able to see how the OFNS aligns with government commitments as outlined in mandate letters in the areas of healthy eating and active living.

The OFNS Design Team has identified three key strategic directions:

- **Healthy Food Access:** People in Ontario have access to and the means to choose and obtain safe, healthy, local and culturally acceptable food.
- **Food Literacy and Skills:** People in Ontario have the information, knowledge, skills, relationships, capacity and environments to support healthy eating and make healthy choices where they live, gather, work, learn and play.
- **Healthy Food Systems:** Ontario has diverse, healthy and resilient food systems that promote Health and sustainability, and contribute to an equitable and prosperous economy.

Some of the long term outcomes of relevance from the OFNS are:

- Increased individual, household and community food security
- Healthy, local food is available and accessible in all communities
- Increased food literacy and food skills
- Engaged citizens
- Increased consumption of healthy and local food
- Improved holistic health outcomes
- Increased demand for and production of healthy and local food

¹² Ontario Food and Nutrition Strategy. October 2014. Available at: <http://sustainontario.com/work/ofns/>

- Strengthened economy
- Safe and resilient food systems

We are pleased to already see some initiatives emerge from the Healthy Kids Panel recommendations that are aligned with the OFNS. We applaud investments in breastfeeding supports through Ontario's 36 public health units as prenatal education and support for breastfeeding is essential for healthy child development. We also applaud the ongoing commitment and recently announced investment of more than \$32 million over the next three years to enhance Ontario's [Student Nutrition Program](#) and to create more than 340 new breakfast and morning meal programs in schools across the province. We hope that all public schools in Ontario will eventually have a vegetable and fruit program.

The OCGHEPA is also pleased to see that menu labelling legislation is on the political agenda, but would like to see Bill 45, the *Making Healthier Choices Act* take a more robust approach to this issue and hope the government will consider these recommendations as the bill moves forward. Menu labelling legislation and regulations should:

Provide consistent, clear and visible nutrition information.

- Require food service premises in Ontario to provide consistent, clear and visible nutrition information available about the foods they sell.
- Both calories and sodium should be clearly displayed on menu boards and menus. Menus and menu boards should also include reference values for calories and sodium in order to put nutrient amounts in the context of daily needs.
- Show the 13 core nutrients per ready-to-consume serving of each menu item in the available supporting materials. This can be done through product information pamphlets, websites or other communication tools. Consumers could be directed to EatRight Ontario for information and tools to help put this nutrition information into context for their own personal use.

Public focused nutrition communications strategy.

- Implement a nutrition communications strategy and education campaign to increase awareness and educate the public on menu labelling and making healthier choices when eating out.
- Ensure that any proposed legislation encompass education and awareness-building of healthy eating patterns consistent with Eating Well with Canada's Food Guide, and incorporates a strong evaluation component to monitor both intended and unintended effects.

Support Access to Nutrition information about menu labelling.

- Support access to nutrition information and programs about menu labelling and making healthy food choices through publicly available means such as Public Health, Nutrition Resource Centre, EatRight Ontario, Dietitians of Canada's Eatracker and Eatwise and private, voluntary initiatives.

The OCGHEPA does however highlight the need to evaluate the effectiveness of the existing School Food and Beverage Policy (PPM 150), which has been in place since September 2011, because the standards only apply to food "sold" at school and does not address foods offered to students, or accessed at local shops.

It is important that ongoing support for healthy eating and food skills remain a focus in order to promote population health and healthy lifestyles. Initiatives such as the revised Health and Physical Education Curriculum, Ontario's School Food and Beverage Policy

along with the passage of menu labelling legislation have the potential to have a great impact. Programs like the Healthy Communities Fund, has over the years, enabled the creation of some good programs in the community around healthy eating and physical activity. While there is a desire for more robust information gathering of successes in order to better understand outcomes that were achieved, should funding for the Healthy Communities Fund be removed, the financial gap would jeopardize and potentially undermine the great work being undertaken in communities when supported by and collaborating with public health professionals.

Funds should be dedicated to food skills education as part of the school curriculum as children are not always provided with food skills or knowledge at home. Nutrition resources should be made available to educate teachers on how to incorporate food literacy and nutrition into classroom and extracurricular activities to develop the skills necessary for lifelong healthy eating habits. Home economics is a main source of nutrition education and contributes to food literacy and food skills development, but is currently lacking in elementary schools and is an optional course in Ontario high schools.¹³ Having at least one mandatory food and nutrition course before graduating from high school could go a long way to addressing this gap. A positive relationship has been found between cooking skills and healthy food consumption in youth.¹⁴ The OFNS recommends including evidence-based food literacy education about nutrition, food, growing, harvesting, gathering and producing food and food skills development as a mandatory part of the curriculum at all grade levels.¹⁵ This could also help support the recently announced food literacy goals under the Local Food Act, 2013, which include seeking to increase the number of Ontarians who know how to prepare local food meals for family and friends, and could provide a vehicle to measure progress towards the achievement of these goals.

Food de-skilling is increasingly impairing the ability of Ontarians to translate healthy eating messaging into behaviour. This speaks to the reason-for-being of the Community Food Advisor (CFA) program, whose volunteers undergo extensive training in healthy eating and food safety, for high-quality and relevant addressing of identified needs of their local communities. Given that the well-established link between food and health, as well as that food is a powerful economic driver for Ontario, it is opportune to combine mandates of health promotion and economic prosperity through food. Many of the benefits of local foods fit into the overall CFA messaging and activities towards healthier food choices and behaviours. Therefore, the purposes of the CFA program are complementary to the Local Food Act's food literacy goals, recently issued by OMAFRA. Rather than separate approaches to food skills/literacy, a coordinated provincial approach combining health and economic agendas means efficient dedication of resources shared across Ontario. Re-establishing government funding for provincial coordination of the [Community Food Advisor](#) (CFA) Program is a prime opportunity within a coordinated approach, and will support the CFA program in fostering food skills/literacy for Ontario's children and youth, parents and other community members.

The EatRight Ontario (ERO) Dietitian Advisory Service increases access to nutrition advice from Registered Dietitians through a toll-free number and web-based services. EatRight Ontario has expanded its role to support implementation of provincial policies and programming such as the Ministry of Education's School Food and Beverage Policy, and is exploring options to better integrate with other provincial nutrition services delivery. This program requires continued funding for operations, as well as promotion strategies,

¹³Oogarah-Pratap B, Bholah R, Cyparsade M, Mathoor K. Influence of home economics on the nutrition knowledge and food skills of Maruitian school adolescents. *Nutrition and Food Science*. 2004 Dec 1;34(6):264-7.

¹⁴ Larson NI, Perry CL, Story M, Neumark-Sztainer D. Food preparation by young adults is associated with better diet quality. *J AM Diet Assoc*. 2006 Dec;106(12):2001-7.

¹⁵ Ontario Food and Nutrition Strategy. October 2014. Available at: <http://sustainontario.com/work/ofns/>

particularly to groups at high risk of poor nutrition and chronic diseases, and to health intermediaries, to ensure it achieves its mandate.

The Nutrition Resource Centre (NRC) requires continued funding to promote healthy kids and a healthy population. The NRC is the only resource centre funded by the government that works to strengthen the capacity of health promotion professionals and community partners involved in healthy eating and nutrition across the health continuum. Through networking and collaboration, the NRC fosters knowledge transfer and exchange and provides evidence-based resources and tools to support program and policy development throughout Ontario.

Improve access to quality physical activity and food education opportunities for children at school and in the community.

Children spend a large part of their formative years in school, with the education system playing a vital role in the development of their attitudes towards physical activity and healthy living. As part of a comprehensive obesity strategy, constant monitoring and systematic review of existing programs must be done to ensure schools are effectively and uniformly adopting and implementing policies. The Daily Physical Activity (DPA PPM 138) policy in elementary schools requires all elementary students to engage in 20 minutes of moderate-to-vigorous intensity physical activity each school day. This policy is a great way to engage students and promote physical activity, however, regulation is an issue because delivery and monitoring of this policy is the responsibility of the school authority. The 2013 Auditor General's Report on Ontario's Healthy Schools Strategy found that neither the Ministry of Education nor school boards actually monitor schools to ensure that students get the required amount of DPA.

Inclusive, quality physical activity should be a school and community priority from kindergarten throughout secondary school with an emphasis on developing physical literacy not just traditional, competitive organized sports. Other creative ways of engaging children in a wide range of enjoyable quality daily physical activities should be explored within and outside of the curriculum (e.g. adopting a Teaching Games for Understanding (TGfU) approach to physical activity, intramurals, community access to facilities, Active Safe Routes to School and after-school recreation programs).

The OCGHEPA echoes the recommendation that a health and physical education credit should be made mandatory in every grade throughout secondary school as was put forward by a number of organizations including the Ophea and the Ontario Society for Physical Activity Promoters in Public Health and echoed in Cancer Care Ontario and Public Health Ontario's blueprint [Taking action to prevent chronic disease: recommendations for a healthier Ontario](#).¹⁶ The OCGHEPA applauds the public commitment by the Minister of Education to release the revised Health and Physical Education Curriculum for elementary and secondary schools by September 2015 as health and physical literacy are stated as the main goals. Continued efforts are needed to create the kind of physical literacy enriched school environments that provide children with the skills, knowledge and motivation to lead a healthy and active life.

The OCGHEPA is very supportive of the comprehensive direction of Ontario's revised elementary Health and Physical Education Curriculum but while physical literacy is identified as a main goal, it is not currently measured and should be held to the same level as literacy and numeracy. The curriculum, once fully implemented, has the capacity to act as the single largest health promotion

¹⁶ Cancer Care Ontario, Ontario Agency for Health Protection and Promotion (Public Health Ontario). Taking action to prevent chronic disease: recommendations for a healthier Ontario. Toronto: Queen's Printer for Ontario; 2012.

mechanism in the province, providing 2.1 million students with the tools to lead a healthy, active lifestyle. The OCGHEPA would like to see the holistic foundations of this policy adopted as a strategy across government to support healthy lifestyles for children. It is our belief that this curriculum can help an entire generation get a healthy start, create healthier individuals and communities, and lessen the burden on our health care and social service systems.

Studies have shown that children may get up to 30% of their daily physical activity between 3pm and 6pm, which means the after school period also provides a window of opportunity to engage and instil positive physical activity behaviours in children.¹⁷ Like physical activity, food skills should be a component of recreational programs after school targeted to both children and parents. Use of school kitchen facilities would be required for these programs. Schools can be used as community food centres and are ideal venues to teach food skills outside of school hours. Affordable or free recreation programs help provide children and their families with opportunities to get the recommended daily amount of physical activity as recommended by the Canadian Physical Activity Guidelines. This is important to combat childhood obesity and improve the health of today's children and youth across Ontario. We support [Ontario's Community Use of Schools initiative](#), which provides the much needed access to schools for community programs that promote physical activity and healthy eating, and look forward to working with the Minister of Education on the new community hubs policy to further expand access for this type of programming.

Monitor and evaluate programs, policies and strategies to improve health and reduce health inequities, update the Day Nurseries Act and work on further execution of the provincial poverty reduction strategy.

People in the lowest socio-economic position account for the greatest proportion of a jurisdiction's poor health and negative health behaviours.¹⁸ Focused efforts to reduce health inequities and continued work on the poverty reduction strategy are imperative. In a 2012 Canadian Medical Association Report Card on Health survey, 22 per cent of parents in low-income families reported having overweight children, compared to 9 per cent in families with higher incomes.¹⁹

The [Household Food Insecurity in Canada Report 2012](#) reports that 571,300 households in Ontario were food insecure in 2011 and that food insecurity was closely related to income level. The Poverty Reduction Strategy should address the fundamental issue of food access – the ability of all Ontarians to procure nutritious and culturally acceptable food at all times. We recognize this is not a simple matter. The government needs to improve individual and household income to enable citizens to afford healthy food through adequate minimum wage and social service allotments, improve the availability of affordable housing, affordable childcare, seniors care, public transportation, education and training and employment opportunities.

The Nutritious Food Basket data (collected annually by all health units) and the cost of housing (reported by the Canada Mortgage and Housing Corporation) should be used to increase the rates for social assistance (OW and ODSP), the minimum wage, and in the review of the Special Diet Allowance.

Many low-income families are unable to provide nutritious meals to their children due to the lack of availability and affordability of healthy foods in their community. As a result, parents often

¹⁷ Active Healthy Kids Canada Report Card on Physical Activity for children and youth, 2011. <http://dvqdas9jty7q6.cloudfront.net/reportcard2011/ahkcreportcard20110429final.pdf>

¹⁸Institute for Clinical Evaluative Sciences. What does it take to make a healthy province? A benchmark study of jurisdictions in Canada and around the world with the highest levels of health and the best health behaviours. Nov 2009. www.ices.on.ca/file/Healthy%20province%20November%20release.pdf

¹⁹Canadian Medical Association (2012). 12th Annual National Report Card on Health Care. Accessed at: http://www.cma.ca/multimedia/CMA/Content/Images/Inside_cma/Media_Release/2012/reportcard/CMA-2012National-Report-Card_en.pdf

turn to cheap, processed, readily available alternatives that are low in nutritional value and high in sodium, fats and empty calories. Healthy foods should be competitively priced and made available as attractive alternatives to unhealthy food, so that parents can be enabled to provide healthier meals. Further community food access solutions that promote the availability and affordability of fresh, locally or regionally grown foods and create opportunities to implement and expand these initiatives throughout the province should be supported (e.g. fresh vegetable and fruit boxes, preparation of traditional foods, farmers' markets, community food hubs, and community gardens).

As part of the efforts being undertaken to curb childhood obesity, updating the *Day Nurseries Act* would not only help alleviate some at home financial burdens as it could mandate to provide healthy and nutritious foods that are consistent with the current Canada's Food Guide to children who are in child care, including those in full day kindergarten and before and after school programs, but also provide education opportunities related to physical literacy, food skills, food preparation from an early age, laying the groundwork for healthy habits. Leveraging this opportunity, separate nutrition guidelines should be developed, independent of the legislation, similar to the Nutrition Guidelines for Student Nutrition Programs and PPM150, allowing the guidelines greater flexibility to be updated as it becomes necessary to align with changes made to Canada's Food Guide and harmonization with other provinces. Ontario can look to Nova Scotia and Prince Edward Island who both have nutrition guidelines for child care centres.²⁰

Create or revitalize built and social environments in which we live, work and play to support and encourage healthy eating and active living.

Community design and urban planning have an impact on physical activity levels and access to fresh, healthy foods, so built environments, including community design, land use, and the building of transportation systems, can either encourage or discourage physical activity and healthy eating. Working with builders and planners, all levels and ministries of government can work together to create a functional built environment promoting healthy eating and active living in the community. Access to community centres with affordable or free exercise and food education programs would help provide individuals with opportunities to participate in the recommended daily amount of physical activity recommended by Health Canada or to increase their food literacy without financial burden.

Prior to hosting the Olympic and Paralympic Games in 2010, British Columbia launched the World Healthy Living Challenge that asked participants to take the ActNow BC Healthy Living Pledge and make three small improvements to their daily lifestyles (related to its main focus on chronic disease reduction factors). Healthy living prizes such as personal training sessions, dietitian consultations and tickets to the 2010 Winter Games were provided as incentives.²¹

With the Pan Am Games coming to Ontario in the summer of 2015, there are still opportunities to launch an awareness and engagement campaign focused on the benefits of healthy eating and active living geared towards children, youth and their parents with healthy incentives to participate as part of promotional programming for the Pan Am Games.

Conclusion

Effective health promotion programs can return over \$5 for every \$1 spent; prevention saves government dollars in the long run.²² Increased investment in health promotion and

²⁰ http://www.gov.ns.ca/coms/families/provider/documents/Manual-Food_and_Nutrition.pdf

²¹ British Columbia Ministry of Healthy Living and Sport News Release. Province Challenges the World in Healthy Living. http://www2.news.gov.bc.ca/news_releases_2005-2009/2009HLS0005-000178.htm

²² Trust for America's Health. Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities. July 2008. <http://healthyamericans.org/reports/prevention08/>

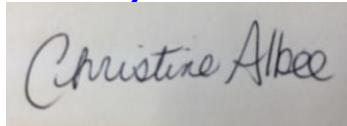
disease prevention will help counteract the increasing costs and burden on the health care system and improve the overall health of Ontarians.

The recommendations put forward by the OCGHEPA are aimed at ensuring all Ontarians have access to healthy options regardless of their socio-economic circumstance. Inaction will continue this unhealthy trend that, by 2040, will result in up to 70 per cent of today's children being overweight or obese adults and almost half of the children will be an unhealthy weight.²³

The Government of Ontario needs to support the creation of environments that support healthy eating and active living and reducing health inequities. These should be key elements of the future health and wellness strategy. Dedicated funding and resources for these strategies and the recommended initiatives are necessary to achieve government's goal of reducing obesity by 20 per cent over five years, reducing chronic disease in Ontario's residents and ultimately reducing health care costs. This will involve strengthening important initiatives that are already underway as well as identifying much needed policies and environmental supports.

Monitoring, evaluating and reporting combined with leveraging the strengths, energy and resources of the various ministries within government and other important health partners and stakeholders, we can make Ontario the healthiest province in Canada. We look forward to the next steps and the opportunity to provide input into programs and initiatives that will provide Ontarians with environmental supports so that the healthy choice becomes the easy choice.

**Submitted on behalf of:
Ontario Collaborative Group on Healthy Eating and Physical Activity (OCGHEPA)
Advocacy Subcommittee**



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The mission of the Ontario Collaborative Group on Healthy Eating and Physical Activity (OCGHEPA)* is to improve the health of all Ontarians by advancing healthy eating and physical activity initiatives through strategic partnerships, knowledge exchange and collective action. We envision an Ontario that supports healthy eating and active living for all.

****The Ontario Collaborative Group on Healthy Eating and Physical Activity is a provincial collaboration of non-profit, health and academic organizations dedicated to addressing population-based issues relating to healthy eating, physical activity, healthy weights and the determinants of health, including food access, availability and adequacy. Partners on the Advocacy Subcommittee include Canadian Cancer Society, Canadian Diabetes Association, Dietitians of Canada, Heart and Stroke Foundation, Ontario Society of Nutrition Professionals in Public Health, Ontario Chronic Disease Prevention Management in Public Health, Parks and Recreation Ontario, Ophea, Sustain Ontario and Ontario Society for Physical Activity Promoters in Public Health.***

²³ Le Petit C, Berthelot JM. Obesity: A Growing Issue. Statistics Canada catalogue no. 82-618-MWE2005003. 2012.