

**Written Pre-Budget Submission in Advance of the
Upcoming Federal Budget**

By: Dietitians of Canada



Recommendations

- **Recommendation 1:** Address household food insecurity by developing and implementing financial measures that increase household incomes.
- **Recommendation 2:** Support Indigenous food systems and the right of communities to define and have decision-making control over their food systems and build on the communities' existing strengths.
- **Recommendation 3:** Expand the Canada Student Loan Forgiveness Program to include registered dietitians working in rural and remote communities.

Introduction

Each year, Dietitians of Canada develops priorities that target key issues facing Canadians, while leveraging the critical role dietitians play in the healthcare system nationwide. Dietitians are the most credible and trustworthy source of food and nutrition expertise.

Registered dietitians are the principal providers of nutrition care. Dietitians play a critical role in healthcare by improving physical health and mental well-being and preventing chronic diseases through nutrition. They assess individual needs and provide expert dietary advice to manage and prevent conditions throughout life stages. By bridging nutrition and health, dietitians empower individuals to make informed food choices. Whether collaborating with other healthcare professionals, undertaking scientific research, driving innovation in the food industry, informing public policy, or working with patients and communities across the country, dietitians' influence continues to improve the health and well-being of millions of Canadians.

The following sections detail key areas of public policies and programs that reflect the goals and objectives of Dietitians of Canada's priorities, including addressing the food insecurity crisis in Canada and recognizing the opportunities for supporting dietitians to practice in rural areas and address critical gaps in healthcare and access for Canadians.

Recommendations

Recommendation 1: Address household food insecurity by developing and implementing financial measures that increase household incomes

Household food insecurity (HFI) is a significant problem in Canada. In 2022, almost one in five households (17.8%) across all provinces reported that they experienced some level of food insecurity in the previous year.¹ HFI cannot be solved through food charity, food waste diversion or community food programs because **its cause is economic and needs to be addressed through economic intervention**. As Canadians face rising costs of living and the uncertain implications of tariff threats, the government needs to turn towards economic policies that increase household income, such as strengthening or establishing tax credits and transfer payments to individuals and other economic policies that reduce poverty, including indexing these programs to inflation.

It is also critical to apply a health equity approach when developing economic policies to address the unfair and unjust burden of household food insecurity based on sociodemographic factors, including race, education, household structure and home ownership status. To better understand the issue among marginalized populations, data collection on household food insecurity across all regions must include measures that collect race-based data and identify food insecurity in Indigenous households. Addressing this crisis will improve health outcomes and reduce strain on our already overburdened healthcare systems, making it a critical priority for government action.

- Healthcare system usage and costs, and rates of chronic health conditions (e.g. diabetes, high blood pressure) increase as food security status worsens.
- Individuals experiencing severe food insecurity are 1.4 times more likely to die prematurely than individuals who are food secure. Of the estimated \$155 billion spent on acute healthcare between 2011 and 2017, \$6.2 billion is estimated to have been excess costs due to food insecurity.²
- Adults from food-insecure households are more likely to delay or not fill a prescription, reduce medication dose from the one prescribed or skip doses altogether as a way to cope financially, which can lead to worse health outcomes and increased use of the healthcare system.
- Evidence suggests that individuals experiencing food insecurity are more likely to visit the emergency department and stay in the hospital longer than individuals from food-secure households. Food insecurity can cause developmental impairment, chronic physical problems and serious mental health conditions.

¹PROOF, University of Toronto (2022). Household Food Insecurity. <https://proof.utoronto.ca/wp-content/uploads/2023/11/Household-Food-Insecurity-in-Canada-2022-PROOF.pdf>.

² Men F, Gundersen C, Urquia ML, Tarasuk V. Food Insecurity Is Associated With Higher Healthcare Use And Costs Among Canadian Adults. *Health Aff (Millwood)*. 2020 Aug;39(8):1377–85.

Recommendation 2: Support Indigenous food systems and the right of communities to define and have decision-making control over their food systems and build on the communities' existing strengths.

Indigenous households experience disproportionately higher rates of household food insecurity, not only due to inadequate income, but also because of the unique factors affecting the availability, accessibility and utilization of food. Addressing this requires an approach rooted in advancing reconciliation with Indigenous Peoples, recognizing and supporting Indigenous self-determination in food systems, and valuing traditional knowledge and practices. Depending on geographic region and living circumstances, Indigenous households experience about two to six times greater total prevalence and severity of household food insecurity, compared to other households in Canada³. The high price of market/store-bought foods in Canada's north is particularly challenging for households with limited financial resources, as is the case for many Indigenous households in the Territories and northern/remote areas of the provinces. Key factors impacting household food security amongst Indigenous populations in Canada, contributing to alarmingly high rates, include:

- Poverty/low income and unemployment;
- Lack of access to the land (including, but not limited to, Treaty or titled land) and financial costs for acquiring traditional/country foods; environmental changes affecting traditional/country food harvesting and consumption;
- Geographic isolation and the unreliable supply, quality, and high prices of market food in remote and isolated communities.

Along with supporting Indigenous sovereignty and food systems, the government should:

- Remove policy barriers that restrict or ban land-based food activities.
- Implement policies and strategies that improve the availability, affordability and quality of foods at grocery stores.

Recommendation 3: Expand the Canada Student Loan Forgiveness Program to include registered dietitians working in rural and remote communities.

We applaud the federal government for expanding student loan forgiveness in 2024 and 2025 for health professionals working in rural and remote areas. This program, previously available to a limited number of professions, now recognizes the vital contributions of a wider array of healthcare and social service providers. For this program to achieve its full potential in supporting the health and well-being of Canadians in underserved areas, it must

³ Tarasuk V, Fafard St-Germain AA, Mitchell A. Geographic and socio-demographic predictors of household food insecurity in Canada, 2011-12. BMC Public Health. 2019 Jan 3;19(1):12.

be further broadened to include dietitians, whose expertise in nutrition and disease prevention is fundamental to comprehensive healthcare delivery.

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Access to extended healthcare services in rural and remote communities remains a significant challenge for over 6 million Canadians.⁴ Northern, geographically isolated and small communities often face disproportionate challenges in accessing essential healthcare services and worse health outcomes than those living in urban areas. Geographic factors coupled with healthcare workforce challenges further exacerbate these ongoing barriers, forcing many people to travel hours to access care, even for emergencies. As Canada's rural and remote populations grow in some regions, it is crucial to increase access to preventative care services and alleviate healthcare system burdens. This can be achieved by incentivizing dietitians to practice in these underserved communities, particularly where reliable access to primary care is lacking.

By increasing the list of professions eligible for student loan forgiveness, the federal government will be directly helping Canadians train for new job opportunities while also providing the younger generation with affordable education opportunities in the healthcare sector. Including dietitians on this list would improve Canadians' health outcomes while encouraging the growth of Canada's healthcare workforce.

About Dietitians of Canada

First established as the Canadian Dietetic Association in 1935, Dietitians of Canada was officially formed in 1997. As an association, our focus is on advocacy, professional practice, leadership development and building a diverse and inclusive community. We advocate for increased access to dietitian services in the healthcare system and on employee health benefits. Our purpose is to connect and support members while increasing awareness of the role and value of dietitians. After more than 80 years, we remain an innovative organization with strong member leadership and a desire to embrace the future.

⁴ Statistics Canada (2022). Population growth in Canada's rural areas, 2016 to 2021.
<https://www12.statcan.gc.ca/census-recensement/2021/as-sa/98-200-x/2021002/98-200-x2021002-eng.cfm>.