

Promoting healthy eating at work

STATUS REPORT, DEFINITIONS AND PRESENTATION OF THE LINKS BETWEEN FOOD, PHYSICAL AND MENTAL HEALTH, AND WELL-BEING IN THE WORKPLACE

This tool is for:

The person responsible for implementing good practices for health and quality of life at work.

Objectives of the tool:

Give a status report on food; define the concepts discussed; show the connections between food and physical and mental health; indicate the impacts on companies' performance indicators.



Setting the context

Today, many studies explore the health of populations, as good health is “a major resource for social, economic and personal development and an important dimension of quality of life.”¹ In fact, people who are in good health keep health care costs in check and contribute to a strong economy. The same is true for businesses: a healthy employee is more productive, motivated and engaged in the company’s overall health.

The prevention of chronic diseases, which are the main causes of death around the world, is a huge challenge. For example, based on estimates, these diseases cost \$190 billion per year in Canada,² a financial burden that continues to grow as the resulting morbidity, comorbidities and mortality increase.³ In France, in 2020, chronic diseases and their treatments account for two thirds of health spending, or 104 billion euros.⁴ Added to this are current issues related to mental health. According to the World Health Organization (WHO), depression and anxiety increased by more than 25% during the first year of the COVID-19 pandemic.⁵

Addressing these two issues happens mainly through preventing their risk factors. Given that one factor is poor nutrition, this tool has a particular focus on food and its impact on physical and mental health.

Given that employees spend a lot of their time at work, the workplace is a natural setting for increasing awareness by putting in place prevention policies for healthy eating. Employees' nutrition can also have an impact on companies' performance indicators!

DID YOU KNOW?

In Canada, a poor diet is the leading risk factor for mortality and the second-highest risk factor for disability.⁶ Also, the economic burden of unhealthy eating is high – around \$13.8 billion per year in this country.⁷

A few figures on the eating habits of Canadians and French people

	CANADA	FRANCE
Excess weight and obesity	1 in 3 adults is overweight, and 1 in 4 is obese. ⁸	1 in 2 adults is overweight, and 1 in 6 is obese. ⁹
High consumption of ultra-processed foods (UPFs)	Consumption has dropped since 2004, but the trend is still strong. On average, UPFs account for more than 45% of daily energy intake for the population as a whole and more than half among children and adolescents. ^{10,11}	Increase in consumption of processed foods/mixed dishes, of which 2/3 are made industrially and only 1/3 are homemade. ⁹
Consuming too much salt	2,760 mg of sodium per day (around 7 g of salt); higher than the recommended amount of 2,300 mg per day (5.75 g of salt). ¹²	7 g of salt per day for women and 9 g for men; higher than the recommended 6.5 g/day for women and 8 g/day for men. ⁹
Consuming not enough fibre	Most Canadians consume only half the recommended amount of fibre, set at 25 g/day for women and 38 g/day for men. ¹³	20 g of fibre per day; lower than the recommended 30 g/day. ⁹
Consuming not enough fruits and vegetables	More than half of Canadians age 12 and up consume <u>fewer</u> than 5 fruit and vegetable servings per day (60.3%, or 17.1 million). ¹¹	Only 40% of adults reach the recommended goal of eating at least 5 fruit and vegetable servings per day. ⁹
Snacking Daily consumption of food or drinks outside of the three main meals and snack	Increase in snacking during the COVID-19 pandemic. The reasons vary: Canadians mention increased stress and anxiety, boredom, isolation and lack of motivation. ^{1,4}	1/3 of adults snack. ⁹

In France, knowledge of food guides has been studied. It appears that except for the guidelines on fruits and vegetables and on physical activity, only a minority of the population is familiar with the recommendations of the Programme National Nutrition Santé ([National healthy nutrition program, or PNNS).

What we mean by:



CHRONIC DISEASES

Chronic diseases are non-contagious long-term illnesses that can be stable or can change over time. They result from a combination of genetic, physiological, environmental and behavioural factors.¹⁵ The 4 main types of chronic diseases are cardiovascular disease, diabetes, chronic respiratory diseases and cancers.¹⁵

Chronic diseases now account for 7 of the 10 main causes of death around the world, compared to 4 of 10 in the 2000s.⁴ Nearly 1 person in 4 around the world has a condition that increases their **vulnerability** to getting an **illness**: in most cases, it is a chronic disease.^{4,16}

Chronic diseases result from a combination of well-established risk factors, categorized as follows^{15,17}:

- **Baseline risk factors:** age, sex, education level and genetic make-up;
- **Behavioural risk factors:** smoking, poor nutrition, sedentariness and harmful use of alcohol.
- **Intermediate risk factors**, also called metabolic/physiological factors: high blood pressure, excess weight and obesity, hyperglycemia (elevated blood sugar levels) and hyperlipidemia (high levels of lipids in the blood).
- **Other factors:** economic circumstances, environment, aging populations, etc.

Although certain risk factors cannot be changed, people can prevent or slow the progression of chronic diseases by addressing behavioural risk factors: these are modifiable!¹⁵ These are also determining factors, as they can improve the metabolic factors mentioned earlier: rebalancing your diet can, for example, reduce blood glucose or lipid levels.

SOME DATA:

In Canada, **around 4 out of 5 adults have at least one modifiable risk factor, and more than 1 in 5 adults have a major chronic disease.** Every year, two thirds of deaths in this country are caused by these diseases.²

In France, **40% of people aged 16 and up report having at least one chronic illness or health problem.** Cancers are the number one cause of death, followed by cardiovascular disease.¹⁸



MENTAL HEALTH

According to the WHO, **mental health** is “a state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships and shape the world we live in.”¹⁹

The mechanisms as well as the risk factors for mental health are not as well established as those for chronic diseases. In fact, there is a significant personal dimension: after being exposed to a risk factor, some people do not develop a mental health problem; conversely, others develop one without a known risk factor. The WHO notes that mental health is determined by “a complex interplay of individual, social and structural stresses and vulnerabilities.”¹⁹

An emerging discipline, called nutritional psychiatry, studies the impact of consuming certain nutrients and food supplements on mental health. **According to some recent studies, food and mental health are related. In this way, a poor diet seems to exacerbate mood disorders, including anxiety and depression.²⁰ And, on the contrary, healthy eating seems to be associated with a reduced likelihood of having depression.²¹**

The promotion and protection of mental health at work is an area of growing interest.

SOME DATA:

In Canada, **1 in 25 adults aged 20 and up reports having an anxiety or mood disorder and at least 1 of the 4 major chronic diseases at the same time.**

Anxiety and mood disorders are the main cause of absences from work among adults of working age.² Chronic diseases and anxiety and mood disorders are the source of nearly one third of direct spending on health care in Canada.²

In France, **1 in 5 people have a psychiatric disorder each year (13 million people).** Reimbursed expenses related to psychological distress and psychiatric illness are the main type of health insurance expenditures, ahead of cancers and cardiovascular disease.²²

DID YOU KNOW? – DEPRESSION

According to the WHO, depression is a common mental disorder that affects 5% of adults around the world. Not to be confused with passing emotional reactions related to the ups and downs of daily life, depression can become a serious illness and can cause great suffering, affect work and family life and, in the worst cases, lead to suicide.²³ Depression results from a complex interaction of social, psychological and biological factors. It has been proven that prevention programs reduce depression²³; this happens mainly through a healthy lifestyle and an adequate and balanced diet.



LINKS BETWEEN CHRONIC DISEASES AND MENTAL HEALTH

According to a number of studies on this topic, it appears that chronic diseases increase the risk of developing a mental health disorder, and the opposite is equally true!^{23,24,25,26} Anxiety and mood disorders can lead to unhealthy behaviours, which can develop or aggravate a chronic disease.^{25,27,28,29}

For example, around 35 million Americans have diabetes and are 2 to 3 times more likely to develop depression than people without diabetes.²⁷ And, according to the American Diabetes Association, people with diabetes who have depression have lower glucose control, do less physical activity, have higher rates of obesity and may have more complications from diabetes.³⁰

The exact mechanisms of these phenomena have not yet been identified; further studies are needed. Mental and physical illnesses also have symptoms in common, such as cravings and reduced energy levels, which can increase food intake, reduce physical activity and contribute to weight gain. These factors increase the risk of developing chronic diseases and can have a negative impact on a person's mental well-being.²⁴

Thus, mental health and physical health are fundamentally linked. The coexistence of mental and physical conditions can reduce a person's quality of life, increase the duration of illness and lead to poorer health outcomes.³ This situation also generates economic costs due to lost productivity at work and increased use of health services.

Finally, given that physical and mental health have risk factors that overlap, adopting healthy lifestyle habits can help to improve overall health.

Why be concerned about nutrition at work?

Raising awareness about healthy nutrition in the workplace allows you to:



ADVANCE WELL-BEING AND CREATE A HEALTHY AND POSITIVE WORK ENVIRONMENT

As a lever of social and economic performance, workplace well-being is a growing concern within companies. This benefits employers as much as employees. Employees enjoy better working conditions, which boosts their motivation and productivity. In the long term, the company's profits and performance go up, and employee turnover and absenteeism rates can drop. Finally, well-being in the workplace also makes it possible to reduce stress, which is a major source of health problems that, in turn, are harmful to the functioning of the company. The promotion of healthy eating is one of the elements to include in workplace well-being programs.



REDUCE HEALTH COSTS AND BOOST EMPLOYEES' HEALTH CAPITAL

Occupational health is a key part of a company's health, and today, taking it into account is unavoidable. **Nutrition is the number one risk factor for potential healthy years of life lost, ahead of tobacco and alcohol.**³² As was shown above, a healthy and balanced diet is an essential determinant of health that is one of the conditions of physical, mental and social well-being. And, on the contrary, an inadequate diet appears to be a risk factor for chronic diseases and mental illness. Finally, these diseases can, in turn, be the cause of maladjustment in the workplace or even workplace accidents.

So, investing in and supporting employees' nutrition improves their health and that of the company as a whole while helping to reduce long-term costs.³³ Some studies documented by the International Labour Organization (ILO) show that access to a food service (restaurant, cafeteria, lunch counter, catering service) in the workplace can prevent micronutrient deficiencies, the risk of chronic diseases and obesity through a modest financial investment, which would appear to be quickly amortized by the reduction in the number of employee sick days and workplace accidents.³⁴



INCREASE EMPLOYEES' MOTIVATION AND PERFORMANCE

A healthy, balanced diet boosts employees' productivity by providing them with the nutrients and vitamins that the brain and the body need to function properly. This helps to improve cognitive function, concentration, energy, mood and self-esteem. Also, a balanced diet contributes to physical and psychological well-being, which can reduce absenteeism, thus increasing the company's overall productivity. Meanwhile, a poor diet can result in up to a 20% drop in productivity.³⁴

In conclusion

This status report and the various data found in this document shine a light on a situation that is cause for concern, but for which concrete action can be taken. As a company, to help employees move toward healthier eating, it is essential to do prevention, raise awareness and provide a favourable environment. In this way, tackling the issue of nutrition at work by putting concrete actions in place seems to be an effective way to contribute to preventing risk factors for physical and mental health, reducing absenteeism, increasing employees' productivity and motivation, and ensuring overall consistency when it comes to improving employees' well-being.

If you would like to know more about nutrition and related topics, we invite you to consult:

- The tool **Guide to healthy eating**: Nutritional recommendations and ideas for action.
- The **5 themed fact sheets for your employees** to inform and equip them to improve their eating habits on the following topics: nutrition and psychological health, ultra-processed foods, fibre, fat and protein.
- The **complementary tool on physical activity**.

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