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Dear Committee Secretary

RE: Submission to the Select Committee into the Obesity Epidemic in Australia

Nutrition Australia is a national health promotion charity that aims to inspire healthy eating for all Australia. It is comprised of independent state divisions that provide local programs while working in a consistent manner under the overarching constitution of the National Body. Our national initiatives include National Nutrition Week, Healthy Lunchbox Week and the Healthy Eating Pyramid (aligned with the Federal Government's Australian Dietary Guidelines¹).

Nutrition Australia provides nutrition information, education and consultancy services to a range of stakeholders, such as governments, community groups, early childhood education and care services, schools, workplaces, tertiary institutions, private industry, food regulators and food industry.

Prevalence and economic burden of obesity among children in Australia

Obesity and 'lost wellbeing' from obesity are estimated to cost Australia around \$58.2 billion a year², and high body mass is the largest risk factor for chronic disease in Australia (second behind tobacco use). Nearly two thirds of Australian adults and one quarter of children are considered overweight or obese². Australia is ranked having the fifth highest level of obesity among all Organisation for Economic Co-Operation and Development (OECD) countries³.

The short and long-term harm to health associated with obesity, particularly in children in Australia

The World Health Organisation states that 'childhood obesity is one of the most serious public health challenges of the 21st century'. Childhood obesity remains a growing concern in Australia. Obese children have a much greater chance of becoming obese adults, and consequently face increased risks of developing chronic diseases such as Type 2 diabetes, heart disease and cancer.

The short-term harm to child health, caused by obesity has both physical and psychological effects. Physical effects include high blood pressure, high blood cholesterol, pre-diabetes symptoms (such as insulin resistance and impaired glucose tolerance), bone and joint problems and breathing difficulties including sleep apnea⁴⁻⁸. The psychological effects of childhood obesity include stigmatisation, bullying and low self-esteem which can result in greater risk of these children developing anxiety and depression⁹⁻¹¹.

Obesity-related diseases are already burdening Australia's strained public health system and, if left unchecked, will continue to increase.

Causes of the rise in overweight and obesity in Australia

Poor diet and low levels of physical activity are the primary causes of excess weight. Excessive intake of high kilojoule food and drinks leads to energy imbalance and excess weight gain. Increasing availability of cheap, energy dense and nutrient poor foods are an ongoing concern. Intake of such foods displaces healthy foods, particularly vegetables, that help control weight and have protective effects against chronic disease¹. This is especially of concern for vulnerable, priority groups in the Australian population who live with socio-economic disadvantage. The availability and cost of healthy food is problematic for this population, in particular those who live in rural and remote areas of Australia where fresh produce may be 2-3 times the cost in urban areas, and it is usually of poorer quality¹².

The Australian Dietary Guidelines (ADGs) recommend the types and amount of foods to eat from the following 'core' food groups, for optimal health and wellbeing: vegetables (and legumes), fruit, dairy products, lean meats and alternatives, and grain-based foods.

However, few, if any Australians are eating a nutritious and balanced diet as recommended by the ADGs.

Reports direct from the Australia Bureau of Statistics show that, on average:

- more than 96% of Australians don't eat enough vegetables each day, and that's as high as 99% among children! In fact Australians only eat around half of their recommended intake¹³.
- 30%-40% of energy (kilojoules/calories) consumed each day come from 'discretionary' foods and drinks that are high in kilojoules, and added fat, salt or sugar, such as confectionery, cakes, pastries, salty snacks, deep fried foods and sugary drinks¹⁴.
- For children and adolescents aged 2-18 years the energy intake from discretionary foods makes up to 41% of the energy content of their diet¹⁴.

With the rise of the obesogenic environment, effective policies and programs are required to reverse the rates of obesity and prevent the health burden trajectory that Australia is currently facing¹⁵.

Existing policies and programs introduced by Australian governments to improve diets and prevent childhood obesity

Nutrition Australia recognises that in order to reverse the effects of the obesogenic environment a coordinated national, whole of government approach towards encouraging healthy dietary and physical habits is required.

Current effective strategies and legislation that have been implemented at varying degrees across the states and territories involve policies and programs within schools, for many of which Nutrition Australia has played a role in implementation. School policies can regulate food available to students and the broader school community such as making healthy food available in school canteens.

The national curriculum for Health and Physical Education provides a key opportunity for a coordinated national platform to ensure the application of evidence based nutrition education across all year levels. Effective teacher professional learning opportunities are paramount to ensure consistent and evidence based nutrition education. While nutrition is identified in the curriculum as a key learning area as part of 'health' it is not given as much weighting as physical activity and its inclusion in classroom learning is minimised in some year levels. This can be the consequence of teachers needing more knowledge and confidence to teach this subject area effectively. Effective nutrition education in schools provides students with important life skills taught through a comprehensive approach¹⁶.

The role of the food industry in contributing to poor diets and childhood obesity in Australia

The food industry continues to play a significant role in Australia's obesogenic environment, in particular with respect to children's exposure to unhealthy, energy dense foods. Such foods continue to be developed and marketed to children via increasingly clever avenues. A concerning factor is the association of unhealthy food industry among children's sporting clubs and entertainment venues. It remains a paradox that in an otherwise physically active environment for children, unhealthy, energy dense foods are consistently made available for consumption via food outlets or as incentives. Additionally, sponsorship continue to be sought and offered to children's sporting associations and clubs, many of which are volunteer run making them vulnerable to inappropriate sponsorship. This is evidenced by the following social media post in 2018.

Krispy Kreme Auburn care for the children of this community one of our major sponsors, thanks 🙏



Parents are finding it difficult to find healthy foods for their children and are especially confused when it comes to identifying sugar content in food and drinks. The Royal Children's Hospital Melbourne Health Poll 2017¹⁷, which surveyed 1980 Australian parents, found that:

- Over half of parents (57%) say it is hard to know which foods are healthy choices when buying food for their family
- Two thirds of parents (67%) find it hard to know how much added sugar is in the food products they buy for their children
- Parents are giving their children too many treat foods, with almost half (41%) of pre-schoolers receiving treat foods most days of the week
- A third of children (35%) regularly consume sugar-sweetened drinks, with 26% mistakenly believing fruit drinks may be a healthier choice than water

In conclusion

Urgent action is needed to educate, empower and enable Australians to choose healthier foods and drinks, for better health and wellbeing outcomes, and to reduce the contribution of obesity and poor nutrition on chronic disease, productivity loss, and preventable hospitalisations in Australia.

In addition to the key points mentioned above, Nutrition Australia acknowledges and endorses the recommendations of the [Tipping the Scales](#) report developed by the Obesity Policy Coalition. These recommendations are:

1. Legislation to implement time-based restrictions on exposure of children (under 16 years of age) to unhealthy food and drink marketing on free-to-air television up until 9:30pm.
2. Setting clear reformulation targets for food manufacturers, retailers and caterers with established time periods and regulation to assist compliance if not met.
3. Make adjustments to improve the Health Star Rating System, and make mandatory by July 2019.
4. Developing and funding a comprehensive national active travel strategy to promote walking, cycling and use of public transport.
5. Funding high-impact, sustained public education campaigns to improve attitudes and behaviours around diet, physical activity and sedentary behaviour.
6. Placing a health levy on sugary drinks to increase the price by 20%.
7. Establishing obesity prevention as a national priority with a national taskforce, sustained funding, regular and ongoing monitoring and evaluation of key measures and regular reporting around targets.
8. Developing, supporting, updating and monitoring comprehensive and consistent diet, physical activity and weight management national guidelines.

We urge you to recommend that this action is taken as a priority so that all Australians, including children can live productive and healthy lives.

Yours faithfully



Maree O'Flaherty
President
Nutrition Australia

Please include my colleague Leanne Elliston in all future correspondence regarding our submission into the inquiry. Her contact details are: lelliston@act.nutritionaustralia.org Ph: 6162 2583

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