

Health Claims – their history and future

The context

The majority of Australians base their dietary intakes on foods obtained via the retail food industry with trends indicating an increasing reliance on processed and pre-prepared foods. The label is the initial source of information regarding the potential role of a particular food within the context of the everyday diet for many consumers and, for some, may be the only source. It is therefore critical that the information provided be factual, reliable and meaningful.

Current Australian and New Zealand regulations prohibit health and related claims on food labels or in associated advertising. There is no formal definition of a 'health claim' in either the current Australian or New Zealand food regulations. In essence current regulations prohibit:

- a claim of therapeutic or prophylactic action or a claim described by words of similar import;
- the word 'health' or any words of similar import as a part of or in conjunction with the name of the food;
- any statement, claim, express or implied, or design that directly or by implication could be interpreted as advice of a medical nature from any person; and
- the name or a reference to any disease or physiological condition.

There are also two other categories of nutrition-related claims: those that relate to the presence of a nutrient in a food; and those that describe the role of a nutrient in the normal physiological functioning of the body (commonly called 'nutrition messages'). The questions then arise as to whether or not the current prohibitions on health claims are still relevant or appropriate; and whether there is sufficient evidence to support exemptions to the prohibitions.

Views on the issue are divided. One view is that both industry and consumers are disadvantaged by the current regulations. Another is that food marketing is not an appropriate forum for such information due to the vested interests of the suppliers, and that the integrity of such information may be difficult to ensure and maintain on a food label.

The history

There is an extensive background to health claims in Australia and New Zealand, particularly during the 1990s. Papers written in 1993 and 1996 led to the raising of a proposal (P153) by ANZFA on health and related claims in 1997. The Preliminary Assessment report for P153 proposed a range of issues that should be addressed in the management of health claims (regulation, education, monitoring and substantiation).

In order to provide further information in managing health claims, a further proposal (P170) was raised in 1998 to conduct a trial of a pilot health claim. The claim chosen for the trial was the relationship between increased periconceptional folate consumption and reduced risk of babies developing neural tube defects (hereafter referred to as the folate pilot). The pilot commenced in November 1998 and the evaluation was completed in 1999. It involved: making a temporary amendment to the prohibition to permit the claim to be made; establishing the claimed relationship through a process of scientific substantiation; establishing eligibility criteria for foods to carry the claim; undertaking education and monitoring activities; and working with industry through a co-regulatory approach to enforce the regulations.

The future

Despite the polarised views on health claims, there appears to be strong support for a review of the current regulations. There are concerns that they are ambiguous, leading to inconsistent interpretation of the regulations between governments, industry and consumers, and difficulties in enforcement. These difficulties result in claims being made which to all intents and purposes may present as 'implied health claims', but do not contravene the letter of the law and therefore, may not technically be a breach.

The Full Assessment report for P153 is currently being prepared for consultation. Issues that will be raised in the Full Assessment report include:

Revision of the current regulations in Australia and New Zealand:

- Scope of the new regulations – limited to just health claims or extended to cover the range of nutrition messages on labels?
- Prohibition on health claims – should exemptions be permitted?
- Endorsements – these can be implied health claims, therefore how should these be taken into account?

If exemptions to the prohibition are permitted:

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Dietetics 2000 and beyond

I have had the opportunity to be involved in dietetic training now for over 20 years, beginning at Sydney University in the 80s and here at Newcastle University since the 90s. So what do I believe the Noughties (00s) hold for dietetics?

The past twenty years has seen dietetic training move from a single institution in each state to multiple institutions. It has moved from graduate diploma to masters and back to an undergraduate degree.

We at Newcastle instigated the dedicated undergraduate degree in the belief that dietetics was becoming so information heavy that postgraduate specialisations were the way of the future. We have in place our first specialisation in Sports Nutrition/ Dietetics, available as a Graduate program. With the advent of fee paying postgraduate courses other institutions developed undergraduate programs in dietetics. As a result both undergraduate and postgraduate dietetics produce essentially the same level of competent graduate.

Thanks to the Dietitians Association of Australia, there are strong guidelines as to the necessary competencies required of an entry level health professional, specialising in dietetics. But where is the future for dietetics? Do we continue to produce dietitians strong in clinical and community dietetics? Are there the job opportunities given the expansion in graduate production?

In 1999, I surveyed major employers for the skills required of dietitians/nutritionists outside the traditional domain of clinical and community dietetics. These included government agencies, the food industry, public relations companies and sport and recreation facilities. Note I also used the terms nutritionist/dietitian rather than just dietitian in order to broaden the thinking of those surveyed.



Top nine skills required by employers for graduates

- Verbal communication
- Written communication
- Initiative
- Problem solving
- Innovative approach to work
- Critical reasoning
- Scientific approach to work
- Research skills
- Teamwork

The top three responses were about communication and initiative with verbal clearly differentiated from written communication. Although the knowledge base is essential in dietetics, the ability to communicate that knowledge in an inter-professional setting is what sets the excellent apart from the average. University dietetic programs tend to have communication courses that stress an understanding of information technology, while the one to one and one to many types of communication are taken to be embedded in other subjects.

At Newcastle University, we are bringing inter-professional training to the fore by establishing core components of programs that are taken by all health professionals. I believe that this direction (not multi-skilling but multi-appreciating) will benefit dietetics into the future. Making communication skills explicit in subjects will also enhance the

employability of future dietetic graduates into a broader range of occupations. Opportunities exist to expand into the food industry, the health promotion industry and as government consultants. Communication skills rate highly here as do problem solving and initiative.

So whither dietetics? The ability to be more than a dietitian is required, satisfying though it may be to be a dietitian. In the undergraduate program some degree of mini specialisation is needed. Modules or selectives need developing that permit this to occur. Postgraduate continuing education needs to be available encompassing similar modules to allow the existing workforce to diversify. Those wishing to develop social nutrition skills need access to sociology and psychology. Those requiring business management skills need access to management modules. Those wishing to take the research line need access to research design and mini research projects. Inter-professional skilling, communication and critical reasoning need to be at the core of this process. The knowledge base of nutrition science needs to remain, as does meeting the core competencies required by the DAA. Developing such a model is a real challenge but will enhance the job opportunities for dietitians into the future.

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Wish to Respond? *FOODChain invites readers to send in comments on this issue. Responses can be sent directly to FOODChain Box 2064 Oakleigh Retail 3166, or emailed to gillr@infoxchange.net.au*

Opportunities in public health & community nutrition training around Australia

The presence of public health nutrition and community nutrition teaching in Australian Universities is growing. This edition of *FOODChain* profiles Australian universities offering training in this area, providing readers interested in expanding their skills with a quick guide as to what is on offer. Available space has meant that this is only a thumbnail sketch, however hopefully appetites can be whetted, and contacts for further information followed through. Apologies are made in advance where a university may have been overlooked – if this is the case please contact *FOODChain* so that amendments can be made in the next edition.

Curtin University, WA

The Dept of Nutrition, Dietetics and Food Science is one of six within the School of Public Health, all with an interest in the population health, and offering a range of public health courses. Foci and strengths of research include breast feeding, anthropometry, nutritional epidemiology, PHN and nutrition in the developing world. The department, in conjunction with Murdoch University has just been awarded a government grant of \$1.35 million to fund initiatives in teaching programs.

Deakin University, Victoria

The School of Health Sciences at Deakin University has pioneered the development of formal PHN courses in Australia and supports a strong work program. Population-based research is being conducted in areas including the determinants of disease states or health conditions; the nutritional health of 'at risk' groups, social and cultural influences on food habits; the assessment of food habits and the factors influencing these. Research underway, or planned for the future, includes: an examination of the family environment re children's eating, physical activity and sedentary

behaviours; studies to determine the behavioural pathways to obesity and the feasibility of various weight gain prevention strategies.

Flinders University of SA

The Nutrition Unit, placed within the Department of Public Health, offers on campus PHN and CN units at both masters and bachelor levels. A major strength of the PHN unit is its small group-based peer assessment, and in the CN practice topic unique features are the cooperative learning groups where students learn together in small groups. Research at the university has focused on community nutrition education; nutrition policies at all levels; factors affecting food choice and food service.



Griffith University

The Nutrition Unit at Griffith University, Gold Coast Campus, offers Australia's most recently DAA provisionally accredited post-graduate nutrition and dietetic training program (Masters of Nutrition and Dietetics). Particular emphasis is placed on entry-level competencies in PHN practice. The Unit's applied research focus is in PHN intervention research, particularly

relating to strategy development and evaluation. There are strong collaborative links with Queensland Health's Public Health Service and the Unit has participated in a number of PHN intervention projects over the last two years. There is an expanding Research Masters and PhD student profile with studies currently investigating PHN competency and workforce development; sociological determinants of eating patterns amongst young male adults; and nutrition support in dementia. A three year undergraduate Bachelor of Nutrition & Dietetics is planned for 2002.

Menzies School of Health Research

The post graduate public health courses aim to provide training that is accessible to people working in public health related positions in Central and Northern Australia (and neighbouring regions). Two specific courses in nutrition have been taught in the NT MPH for some years. 'Nutritional Issues in the Developing World', which has included Aborigines and Torres Strait Islanders has been available every year. In alternate years there has also been 'Nutritional Epidemiology', in which students have applied the critical appraisal skills learnt in the basic epidemiology course to nutrition-related topics of their choice. The move to standard unit sizes and collaboration among courses across Australia means that the first unit will be combined with another to form 'Tropical Child Health and Nutrition'. There is great expertise in PHN in the territory, and with the appointment of Prof Kerin O'Dea to the School, postgraduate training in this area will be greatly strengthened.

Monash University

Monash University will be introducing a new four year undergraduate degree in Nutrition & Dietetics within the Faculty of Medicine in 2001. The course is currently in the

process of gaining DAA accreditation. While the degree has a clinical focus, there will be a strong undercurrent of public health and community nutrition training, and the opportunity for field experience in this area. Further post graduate and continuing education opportunities are planned post 2001.

University of Adelaide

Courses at the University of Adelaide are still in their nascency, with PHN units being taught at both MPH and undergraduate levels and new initiatives in teaching and research planned. Nutrition courses are also being developed cooperatively with the University of SA at undergraduate and post graduate levels. These will supplement three existing courses in nutrition and will eventually be available in flexible learning mode. Research covers a wide area of interest, with studies into factors affecting food consumption; nutrition education and promotion; and the effect of specific nutrients on disease.

University of Canberra

The Centre for Biomedical Science offers a range of degrees majoring in nutritional science or PHN. Research opportunities are provided at The Gadi Research Centre, located within the Division of Science and Design at the University, which is an interdisciplinary research group encompassing population health, immunology, sport science and normal and pathobiology. It provides infrastructure and support for post graduate students and researchers, including collaborators from other universities and institutions. The specific nutrition research program includes influences on food choice; food skills and food safety issues; weight control practices and physical activity.

University of Newcastle

The University of Newcastle offers a variety of courses. The undergraduate degree provides an accredited dietetic qualification, with a strong emphasis on community and public health nutrition in terms of both lecture content and knowledge and skills development through fieldwork placements. Research has centred on nutrition

policy, nutrition education and childhood nutrition. Post graduate courses are offered in the area of sports nutrition where research has combined the expertise of the Discipline of Nutrition & Dietetics with that of the Discipline of Human Physiology. Interests in this Olympic year are related to increased sports performance by appropriate dietary means.

University of New South Wales

The Faculty of Life Sciences offers Nutrition and Advanced Nutrition courses at both undergraduate and post graduate levels. Research in the area of nutrition is focussed on public health issues such as the prevention of neural tube defects in Australia through food fortification, and research into calcium deficiency in adolescent females in China and the effects of supplementation.

The University of Sydney

PHN is offered by two departments. The Department of Public Health and Community Medicine integrates PHN into the MPH at graduate level, and into the Graduate Medical Program. Many non-nutrition students will do a treatise or thesis involving dietary measurement and/or interventions. The Human Nutrition Unit in the Department of Biochemistry offers a range of degrees in Nutrition and Dietetics, which include a community nutrition stream. Research projects are undertaken in collaboration with public health and community nutritionists working in the field and have included evaluations of components of the Penrith Food Project, analyses of compliance with dietary regimens in long-term dietary trials, and dietary modelling of folate intakes of older people using the Blue Mountains Eye Study Data set.

The Human Nutrition Unit has recently been successful in securing the tender from NSW Health to set up the NSW Centre for PHN. Dr

Karen Webb will direct the Centre which will create further opportunities for the unit to expand its research interest in public health and community nutrition.

University of Queensland

The university is research-intensive and of international standard with the Nutrition Program part of the Australian Centre for International and Tropical Health and Nutrition. A Master of Community Nutrition has been running since 1979 and currently the much expanded program offers PHN education and training; nutrition research; and projects and consulting, and has a strong focus on Australian, Asian-Pacific and African populations. Main research themes involve conceptual and methodological developments, operational research and aetiological research (focusing on emerging issues). Nutrition staff regularly undertake commissioned projects and consultancies relating to community and public nutrition. A national food and nutrition monitoring and surveillance system for Australia is currently being developed under contract to the Commonwealth Dept of Health and Aged Care.

The University of Wollongong

In addition to providing a range of undergraduate and postgraduate degrees in nutrition and public health, the University has, in conjunction with the Australian Research Council, established The Smart Foods Centre, a Commonwealth Key Centre of Teaching and Research which forms an alliance between government and the food industry. The centre provides formal qualifications, short course and industry placements projects.



Book review

Food Morals and Meaning: The pleasure and anxiety of eating by John Coveney. Published February 2000 by John Wiley & Sons Aust. Ltd. 240 pp. RRP \$150

This book arrived on my desk at an interesting time. Consumed with the task of analysing family discourses regarding the influences on children's eating, I was constantly challenged to consider how much of the values and beliefs iceberg I was actually exposing. The genesis of beliefs and values around food were foremost in my mind, when I was asked to review a book on the historical analysis of food choice in the modern age. As you might expect, I was a receptive audience.

In introducing this work, the author John Coveney notes:

'It is the emergence of nutrition, as a science and a morality, that is the subject of this book. As we shall see, concerns about the pleasure and anxiety of eating have been variously structured at different times in different Western systems of thought. We need to acknowledge that nutrition did not invent a morality about eating, even if it rehearses it. Nutrition merely mapped onto existing concerns about food and pleasure that have been part of Western culture since antiquity. Nutrition that is to say, is the most recent manifestation of this concern.'

It appears that Coveney has been stimulated to approach the modern subject of food choice in part to attend to what he views as highly restrictive approaches adopted in the past. Coveney's criticism of existing histories of nutrition is that they begin with the bright and creative minds of scientists or social reformers and in so doing impose unnecessary limits on a fuller conceptualisation of nutrition. Coveney uses the work of Michel Foucault to inform these criticisms. He notes:

'They [current histories of nutrition], require us to explain the increasing interest and spread of nutrition discourses either in terms of humanistic, progressive, scientific rationality or through a political economy of food choice aimed at manipulating the poorer classes. Left totally unproblematised in these accounts, however, is the nature of

the knowing individual, or subject, who has the capacity for making food choices or recommending them.'

In contrast, Foucault suggests a form of investigation that does not take as its starting point individuals or subject who are generators of ideas, creators of knowledge and discoverer's of things, but which examines instead the contexts from which they are constructed. Therefore, Foucault offers the author the possibility of a different account of nutrition, one that renders other histories of nutrition problematic because it takes as its object the very individual that has been fundamental to them: the modern subject of food choice.

Coveney thus approaches the history of nutrition, or the modern subject of food choice, using Foucault's three modes of analysis of the subject. These modes look at the production of the subject through the knowledge of humanity, which emerged during the eighteenth century; at the way subjects are produced through objectifying and

Coveney skillfully crafts a fascinating history of nutrition, a history of food choice that is not constrained by traditional approaches to the subject.

normalising processes in relation to institutionalised knowledge about what it means to be human; and finally the extent to which individuals produce themselves as subjects. Central to Foucault's modes is the desire to explore the ways in which we set aside a part of our 'selves' as a basis for our moral goals. Coveney explains that these three modes of inquiry allow us to deal with the relationship between discourse, power and the subject.

Hence, Coveney skillfully crafts a fascinating history of nutrition, a history of food choice that is not constrained by traditional approaches to the subject. This history is underpinned by three questions:

- what considerations were made regarding diet prior to the emergence

of nutrition?

- what conditions of possibility were important for the emergence of nutrition? and
- how does nutrition discourse circulate today – how is it produced and reproduced, and in what ways does it produce modern subjects?

In answering these, Coveney covers a number of historical periods and social transformations important in understanding the development of a science of food choice. Coveney devotes much of the latter section of his book to the family as the institution in which food choices are cultivated and exercised. He uses this natural grouping to examine the emergence of the family as a principal site of nutritional control, to discuss how the modern home has been central to the further mobilisation of nutrition, and to examine via detailed interviews with families, the way nutrition discourses construct modern subjects.

From a public health perspective this account of the history of food choice is refreshing in its analysis of the complexity of concerns that impact on the ways we have come to think about food. It is also satisfying to find a range of conclusions that challenge what has arguably become the politically correct speak of adversaries of nutrition and its promotion in recent years.

Coveney concludes:

'The account of nutrition undertaken in this book allows us to see nutrition for what it is: a government of food choice which situates individuals within a field of knowledge for explicit objectives, and, at the same time, provides them with a way of constituting themselves as ethical subjects through a decipherment of their pleasures and fulfillments. [As we have seen] ... nutrition maps onto moral concerns about food and the body which have a long tradition in Western culture.'

This book, while challenging to read, both in terms of its ideas and its language, is highly recommended, providing a unique analysis of the history of food in contemporary culture.

Karen Campbell,

School of Health Sciences, Deakin University

Overview of PHN and CN teaching in Australian Universities

University	Courses	Focus/Subjects	Mode	Contact
Curtin University of Technology, WA	PhDs, M (MPH), GD/GC B: Nutr, Fd Sc&Tech; Diet	PHN; Nutrition for Developing Countries	On/off campus	Ms Deb Jones, Ph 08 9266 2733 Email: enquiry@health.curtin.edu.au http://www.curtin.edu.au/curtin/dept/health/
Deakin University, VIC	PhD (1) MPH (2) B of Food Science. Planned: GC in PHN; Short Courses	(1) Intro to PHN; Nutr Epi; Food & Nutr Policy (2) Social Nutr; Population Nutr; The Food System; Nutr Ass't & Evaluation	On/off campus	Dr David Crawford, Ph 03 9244 6616 Email: dcraw@deakin.edu.au
Flinders University, of SA	MND BND	PHN; CN Practice	On campus	Dr Lynne Daniels Email: lynne.daniels@flinders.edu.au http://www.flinders.edu.au Ms Kaye Phillips Email: kaye.phillips@flinders.edu.au
Griffith University, QLD	MND; MPH	PHN (2001)	On/off campus	Mr Roger Hughes, Ph 07 5594 8530 Email: R.Hughes@mailbox.gu.edu.au http://www.gu.edu.au/school/hsc/
Menzies School of Health Research NT	Doctorate, MPH, GD & GC in PH	Nutritional Issues in the Developing World; Nutritional Epidemiology.	Off campus	Dr Dorothy Mackerras, Ph 08 8922 8283, Email: dorothy@menzies.edu.au
Monash University, VIC	BND (2001) Planned: Post Grad, Short Courses	Social Nutr; PHN	On campus	Ms Maggie Niall, Ph 03 9594 5510 Email: maggie.niall@med.monash.edu.au http://www.med.monash.edu.au/nutrition-dietetics/
University of Adelaide, SA	MPH B Food Tech & Mgt. Planned Nutr courses with Uni of SA	PHN; Consumers, Food & Health	On Campus	Dept-ph@medicine.adelaide.edu.au http://www.health.adelaide.edu.au/PublicHealth/
University of Canberra, ACT	GD & GC in AppSc specialising in PHN BAppSci specialising in Human nutrition	Epi & Health; Research Methods; Influences on Nutritional Change	Flexible delivery	Dr Karen Cashel, Ph 02 6201 2745 Email: cashel@scides.canberra.edu.au Ms Vicki Deakin Ph 02 6201 2567 Email: deakin@scides.canberra.edu.au http://science.canberra.edu.au

University	Courses	Focus/Subjects	Mode	Contact
University of Newcastle, NSW	(1) B of Health Science (N&D) (2) M/GD/GC of Sports Nutrition	(1) CN Practice; Sociology of Food; Nutr Education (2) Community Health Promotion; Intro to Epi & Stats	On campus/ Course work & flexible delivery	Ms Jill Moncrieff, Ph 02 4921 7036 Email: gsjm@mail.newcastle.edu.au Ms Lauren Williams Ph 02 4921 5649 Email: ndltw@mail.newcastle.edu.au Prof David Roberts Ph 02 4921 5648 Email: nddckr@mail.newcastle.edu.au http://www.newcastle.edu.au
The University of New South Wales, NSW	PhD and MSc by Research, MSc by coursework in Food Science & Nutr B in Food Science & Technology; B in Food Science & Nutr	F&N policies; N Epi; Principles, Practice & Eval'n of App Nutr Programs, Advanced ass't methods	On campus	Dr Jayashree Arcot, Ph 02 9385 5360 Email: j.arcot@unsw.edu.au http://www.foodscience.unsw.edu.au
The University of Sydney, NSW	<i>Dept of Public Health and Community Medicine:</i> PhD in Nutritional Epidemiology MPH, GD in PH	Intro to PHN; and nutrition issues incorporated into core subjects (eg Intersectoral approaches to promoting nutrition)	On campus/ distance	Ms Nara Krum 02 9351 4365 or Dr Karen Webb Email: karenw@pub.health.usyd.edu.au http://www.health.usyd.edu.au/studyops/index.html
	<i>Human Nutrition Unit, Dept of Biochemistry</i> (1) Master N&D (2) Bachelor N&D	(1) CN & PHN: incl Nutr Epi; Stats for Nutr; CN&PHN Practice; Food Habits; PHN (2) Nutr in Individuals; Nutr In Populations	On campus	Ms Isa Hopwood, Ph 02 9351 3757 Email: i.hopwood@biochem.usyd.edu.au Soumela Amanatidis Ph 02 9351 3816 Email: s.amanatidis@biochem.usyd.edu.au http://www.biochem.usyd.edu.au
University of Queensland, QLD	PhD, M, GD&GC in Public Health (Community Nutrition) M, PG & GC in Food Studies (Human Nutr)	Focus on Aust & overseas fieldwork. Intro to Nutr; Nutr'l Ass't in the Community; and Nutr Policies Programs and Planning	On/off campus	Dr Geoff Marks, Ph 07 3365 5400 Email: nutrition@nutrition.uq.edu.au http://www.acithn.uq.edu.au/nutrition/
University of Wollongong, NSW	MPH; GD&GC in PH; BND	PHN	On/off campus	Dr Lindsey Harrison Email: lindsey.harrison@uow.edu.au http://www.uow.edu.au/health/publichealth
University of Wollongong Smart Foods Centre, NSW	M Nutr Mgt; MSc Nutr Mgt; GD in Nutr Mgt	Changing set of short courses which can contribute to M. Planned 2001: Food Regulation & Policy, Contemporary Issues in Food & Nutrition	On course	Anne McMahan, Ph 02 4221 4829 Email: anne_mcmahan@uow.edu.au http://www.uow.edu.au/research/centres/smartfoods

Key: M: Masters, MPH: Master of Public Health; GD: Grad Diploma, GC: Grad Certificate; B: Bachelor; BND: Bachelor of Nutrition & Dietetics; App Sc: Applied Science; Ass't: Assessment; CN: Community Nutrition; Epi: Epidemiology; Eval'n: Evaluation; Nutr: Nutrition; PHN: Public Health Nutrition

Hot Progress

The *Healthy Options Tasmania (HOT)* Award program is awarding food outlets who:

- offer some healthy food choices
- meet food safety and hygiene standards; and
- are smoke free.

The *HOT* Program has produced a number of eye-catching promotional materials, e.g. *HOT* menu boards, stickers, certificates, open/closed signs and table toppers for *HOT* Accredited Businesses. The quarterly '*HOT LINES*' news sheet is sent to these businesses, Environmental Health Officers (EHOs) and recipients of the Dept of Health and Human Services Public and Environmental Health news sheet. Copies can be accessed on http://www.DCHS.tas.gov.au/services/public_health/pages/new.html

HOT encourages food retailers to:

- skip margarine or butter on

- sandwiches or ask the customer first,
- skip cream or use yogurt, custard or reduced fat ice-cream instead,
- offer reduced fat milks in drinks,
- offer tomato based pasta sauces,
- prepare meals based on rice, pasta or grainy bread.
- stock fruit or fruit salad,
- offer plenty of salads or vegetable with meals,
- use lean meats and skinless chicken,
- use healthier oils,
- offer water, and
- promote their healthier choices positively.

HOT works with EHOs at local councils to recruit and help accredit food outlets. So far 8 out of 30 councils have taken up the program, including the Hobart and Launceston city councils and approximately 20 stores have been accredited. Food outlets have

responded well, with many making changes to obtain the Award. These include premises going smoke free, using healthier cooking fats and spreads, offering healthier pasta sauces, following the National Heart Foundation's chips guidelines, and using/offering reduced fat dairy products.

The *HOT* Award is offered to takeaways, cafes, restaurants, bistros, lunch bars, kiosks, workplace canteens and caterers, with different nutrition assessments for takeaways versus restaurants and caterers.

For more information contact Rose Romeo on 03 6222 7222.

The HOT Award Program is funded by the Dept of Health and Human Services and is an initiative of the Dietitians Association of Australia; the Dept of Health and Human Services, Tasmania; Eat Well Tasmania; the Australian Institute of Environmental Health and local councils.

News from the Northern Territory

The 1995-2000 NT Food and Nutrition Policy and Strategic Plan is in the final stages of implementation. Major achievements over the last five years include:

- a Territory wide *Growth Monitoring & Action program* is targeted at children 0-5 year old in remote communities, and aiming to prevent under nutrition and growth failure;
- an annual survey of cost, availability, variety and quality of food in remote community stores;
- *Community Nutrition Worker program*. Over 20 positions, most part-time, for community based Aboriginal nutrition workers;
- high prioritization of education and training has involved the training of community based people (nutrition and store workers etc.), plus health professionals and teachers. Higher

education courses in nutrition for Aboriginal health and nutrition workers are now offered through the Batchelor Institute.

A meeting of the Aboriginal Advisory Group was recently held in Darwin to provide an overview of the last five years' progress and to set targets for the new strategic plan. Representatives from communities in each region attended. Major themes and areas of concern arising from the meeting were: the food supply in remote communities (particularly the high cost of food), the need for accredited training, and the initiation of programs by communities and driven by Aboriginal people. Priority areas identified for the next plan are Maternal and Child Health, Food Supply and Healthy Living.

Some new non-government initiatives discussed at the meeting

were the 'Stores and Nutrition Project', and the 'Central Australian Community Store Buying Group'. The 'Stores and Nutrition Project' is a long-term project aimed at improving nutrition whilst ensuring the economic viability of community stores. The nutrition side will have a two pronged approach, with a major focus on nutrition education and improvements in the stores. It involves a number of communities and has been able to secure corporate funding. An Aboriginal Corporation in Central Australia has been funded to undertake a feasibility study for the development and establishment of a Central Australian Community Store Buying Group.

For further information contact Carrie Turner on 08 8999 2695 email Carrie.Turner@DWNHHSSE.THS.nt.gov.au

The MEALS Project

The MEALS (Menu, Education, Advice, Liaison and Support) project is a joint effort between the Unley Council and the Inner Southern Community Health Service, located in metropolitan Adelaide, South Australia, funded by the Dept of Human Services (DHS). The project commenced in March 1999 and is based on the Boarding House Project from the Central Sydney Area Health Service and incorporates the 'Food Book' produced by this service.

The goal of the MEALS Project is to work with facilities to improve the access to nutritious meals and snacks for residents of Supported Residential Facilities (SRF) and Boarding Houses (BH).

The three main objectives are:

1. To increase the knowledge and skills of managers and staff of SRF and BH on nutrition and food service issues.
2. To enhance the role of Authorised Officers (AO) in improving the food service in licensed residential facilities.
3. To explore and implement where possible options for program sustainability in conjunction with the DHS Supported Residential Facilities Unit and others.

The Strategies Employed

Commitment and participation was gained from managers of ten facilities in Unley. A review of the food service arrangements, based on the 22-point checklist in the *Food Book* was conducted.



A survey of AO was conducted across Adelaide to assess current food service auditing processes.

In liaison with AO and proprietors of SRF from the City of Unley, auditing tools on nutrition and food service issues were developed. The project officer is currently liaising with other councils in Adelaide, to pilot the tools.

A focus group with AO from across Adelaide was conducted in May.

Liaison with DHS, SRF Unit, has led to planning for a resource manual.

Outcomes

All ten targeted facilities agreed to partake in the project and nine of the ten facilities underwent the food service review and developed new and nutritionally improved menus. Appropriate resources & training have been provided to these facilities.

Three draft auditing documents have been developed. These documents include:

- A quick Auditing Tool
- An extensive Auditing Tool
- Audit Tool Guidelines, designed for both the AO and the proprietors/managers of SRF & BH.

Negotiations are in place to incorporate the Auditing Tool documents and the training/resource manual developed in DHS, SRF Unit, three-year training plan for SRF and AO.

The project's success in getting all ten targeted facilities to partake in the project and liaising successfully with the stakeholders has highlighted that it is possible to achieve collaboration in an effort to bring about positive change.

For further information and references contact Nancy Hermsen Ph 08 8277 2488, Fax (08) 8277 5629.

Email:

Nancy.Hermsen@rgh.sa.gov.au

Food Supply in rural South Australia

A survey on food cost, quality and variety

In 1999 Eat Well SA, as a first step towards increasing understanding of food supply and access issues in rural South Australia, conducted the *Food Supply in Rural South Australia* survey, the report of which has now been completed. This study was based on a similar study conducted in Queensland by the Tropical Public Health Unit in Cairns.

Data was collected in 46 rural shops (Coles, Woolworths, Bi-Lo, Foodland, Foodtown, Welcome Mart and other small independent stores) and compared to Adelaide.

The cost of a basket of food sufficient to feed a family of six for a fortnight was determined. In the majority of rural stores, the basket cost 5%-24% more and in six stores, 30%-75% more than in Adelaide. The cost was highest in medium and small shops, towns with small populations and the most remote towns and in two very socio-economically disadvantaged towns.

The quality component of the study involved visually assessing six fruit and 13 vegetables and measuring temperature and humidity of the display areas. Overall, quality was good across the state, with the only influencing factor being the number of days since delivery.

The study also looked at the availability of fresh fruit and vegetables. The variety available was strongly associated with the size of the store and the frequency of delivery, and moderately associated with the population of the towns surveyed.

For more details or a copy of the *Food Supply in Rural South Australia* report, please contact Jo Meedeniya on (08) 8204 7762 at Eat Well SA. Email: meedeniyaj@mail.wch.sa.gov.au

Food cent\$ campaign

May was the month for raising Western Australians' awareness of the economic benefits of choosing nutritionally preferable foods when they're shopping with the state-wide Food Cent\$ Campaign.

Food Cent\$ is a successful nutrition program that aims to increase the prevalence of healthy eating behaviours by improving food buyers' knowledge and skills in choosing nutritious and affordable foods. The target group is low to middle-income households, as they are at most nutritional risk.

Food Cent\$ demonstrates that healthy eating is affordable and enjoyable. The Food Cent\$ hypothesis is consistent with the Healthy Eating Pyramid – spend most (60%) of the total food budget on fruit, vegetables, breads and plain cereals, moderate amounts (30%) on lean meat and dairy products, and spend least (10%) on less nutritious foods. Food Cent\$ recommends people compare food prices using price per kilogram, and a Kilo-Cents ready reckoner has been developed for this purpose. Eat Most foods usually cost \$2–4 per kg compared to Eat Moderately foods at \$5–9 per kg and Eat Least foods at \$10–20 per kg.

FOR EVERY \$10 YOU SPEND ON FOOD, SPEND:	
\$1	EAT ON LEAST FOODS Fizzy drinks, crisps, oils, chips, cordial, sweet biscuits, chocolate
\$3	EAT ON MODERATELY FOODS Meat, milk, fish, poultry, eggs, cheese, nuts
\$6	EAT ON MOST FOODS Bread, unsweetened cereals, rice, pasta, noodles, vegetables, beans, fruit

The Food Cent\$ campaign aimed to increase the awareness of Food Cent\$ concepts amongst the target group. Market research is currently being conducted to determine if this was achieved.

Food Cent\$ print advertisements were placed in the Wednesday edition of the state newspaper, *The West Australian*, and selected community and country newspapers for four consecutive weeks. The advertisements highlighted the price per kilogram of similar foods for example, fruit sticks at \$12 per kg versus fresh fruit at \$3 per kg; home delivered pizza at \$12 per kg versus home-made pizza at \$6 per kg. The advertisements offered people the opportunity to attend a free supermarket tour to learn how to save up to \$2000 a year on their food bill and receive a free Food Cent\$ Kit. More than

800 phoned the freecall 1800 number to book into a tour. Food Cent\$ trained regional dietitians conducted tours outside the metropolitan area, and a Food Cent\$ Tour Guide was employed to conduct tours in the metropolitan area.

In addition, Food Cent\$ activities were conducted at Healthway-sponsored horse-racing events to launch and close the campaign. A media release was distributed announcing the campaign that resulted in three prime-time television interviews, four radio interviews and articles in four community newspapers. *Health & Medicine* (an insert in Wednesday's *The West Australian*) – the recent winners of the Public Health Association Media Award – wrote a feature article on the campaign.

The glossy '*Food Cent\$ Family Cookbook*' was reprinted and distributed to newsagents and bookstores throughout the state. The distributors, WA Newspapers, scheduled press advertising of the cookbook to coincide with the campaign.

For further information contact Krista Williams, Ph 08 9222 2073 or Email: Krista.Williams@health.wa.gov.au.

Nutrition activities in Queensland

Queensland Public Health Nutrition Strategy

Progress has commenced on the development of a Queensland Public Health Nutrition Strategy by the Food and Nutrition Working Group of the Queensland Public Health Forum. It is envisaged that the strategy will be produced as a response to the National Public Health Nutrition Strategy Eat Well Australia. The working group is chaired by the Statewide Public Health Nutritionist Dr Amanda Lee who can

be contacted with any queries on 07 3234 1049.

Food Supply

Healthy Food Access Basket (HFAB): Surveys are underway in 88 stores across the state. Ms Anna D'Arcy has been appointed as the project officer. It is envisaged that the data obtained will provide reference to monitor the impact of the GST, particularly in rural and remote community stores.

Food West Project in remote Central West towns: Training for remote

retailers in fresh produce and general retail management will be funded by Public Health Services and commence in October in partnership with Queensland Fruit and Vegetable Growers, and the Australian Institute of Management.

Fruit and Vegetable Promotion: Mr Bob Hughes has been employed as a Senior Project Officer to develop an action plan for the promotion of vegetables and fruit across the state in collaboration with industry, marketing and consumer groups.

Healthy lifestyle and weight reduction programs

The new 'Lighten Up to a Healthy Lifestyle' resource manual from Queensland Health is now available. It is designed to be used as part of a community based healthy lifestyle program which looks at making healthy changes to eating, physical activity, stress and self esteem that will lead to improvements in well being. The book is available from GoPrint bookshop phone 1800 679 778. Cost pre GST is \$10 plus \$3.25 postage and handling.

A Project Officer will be appointed shortly to review the *Lighten Up* program and assist the Lighten Up Review Steering Committee in evaluating and defining roles and future direction of the program and support structures for facilitators.

Additional workshop modules and resources for the *Healthy Weight Program* run in indigenous communities are being developed by project officers Mr Dallas Leon and Ms Nicole Dalton.

Nutrition in Child Care Centres

A model *Food and Nutrition Policy for Family Day Care* has been produced by Queensland Health and the Queensland Dairy Authority. The resource has been posted to all schemes in Queensland.

Nutrition in schools

Queensland Fruit and Vegetables Growers and the Home Economics Institute of Australia have produced two resource kits for primary and secondary schools entitled *The Wonderful World of Vegetables* to support the new Health and Physical Activity syllabus which is being implemented in Queensland Schools. Copies of the kit are available from Mr Noel Harvey on 07 3213 2474.

Resource materials for *Healthy Jarjums* a food and nutrition promotion project for indigenous school children in Southern zone have been printed. The project will be implemented and evaluated formally this year.

Queensland Healthy Weight Program Evaluation

The *Healthy Weight Program* is a weight management program that was developed in 1996 by the Tropical Public Health Units in Cairns and Townsville for use with Aboriginal and Torres Strait Islander people. It was adapted from another Queensland Health program called *Lighten Up*.

The program consists of a series of workshops and individual assessments conducted by more than 100 trained facilitators, the majority being Aboriginal and Torres Strait Islander health workers. Workshop topics include food label reading, low fat cooking, exercise, budgeting, and the Healthy Food Pyramid. The individual assessments (or screenings) include taking measurements of each participant's weight, waist and hips and blood pressure.

A recent evaluation found that one of the main successes of the program was that facilitators felt they had gained a number of skills and improved their nutrition knowledge. They reported improved knowledge in the areas of understanding the nutrition information panel, label reading, budgeting, low fat cooking, some exercise theory and basic metabolism. The facilitators believed that other areas of their work such as diabetes education also benefited.

Quantitative data was made available by facilitators for a total of 260 participants who joined programs during 1996-1999. Of these, only 41 were male. A high drop out rate was found, with only 40% completing the first 9 weeks of the program. However, of those who completed the 9 weeks, weight, waist and hip loss was evident. Of the participants who completed the program up to Screening 3 (week 9) –

- 66% of the females and 79% of the males lost weight.
- 68% of females and 71% of males lost centimetres from their waist.



- 70% of females and 79% of males lost centimetres from their hips.

It was not possible however, to contact participants to look at long term outcomes in terms of sustained diet and exercise changes and weight and waist management.

The evaluation also revealed that the program resources are being routinely used by facilitators for other work such as diabetes education and nutrition education in schools. All facilitators felt that the resources were culturally appropriate, useful teaching tools and easy to use. Program resources are largely visual and are designed to assist facilitators to implement the program. The resources can be purchased as a package or as stand alone resources.

The Healthy Weight Program has met with mixed success. It is a tool which can help address the issue of overweight and obesity within the Indigenous population by providing facilitators and participants with increased expertise in the area of nutrition. The program teaches life skills in order for people to make behaviour changes as it encourages people to seek a healthy lifestyle through good nutrition and physical activity.

For further information on the *The Healthy Weight Program* please contact Sophia Dunn Ph. 07 4050 3655, Email: dunns@health.qld.gov.au

The Healthy Weight Program Resources



ABC

The US Department of Agriculture releases 'Dietary Guidelines for Americans 2000'

'Aim for Fitness, Build a Healthy Base, and Choose Sensibly' are the three leading messages of the US's newly released guidelines for health. Consisting of a subset of ten guidelines, this 40 page booklet is clearly aimed at families – the elderly, adults, teens and children over two. It identifies behaviours that are beneficial to health, with a strong emphasis on physical activity as well as appropriate nutrition.

The guidelines provide explanations in common language of various terms such as serving size and food groups, differences in types of fats, what is meant by physical activity. In addition each guideline is accompanied

by a series of pointers under the heading 'Advice for Today'.

Inherent in them is the recognition that good health is dependent on addressing the different demands presented throughout the lifespan. Children and the elderly are specifically mentioned, and the frequent references to families are a reminder of the responsibilities we carry to help provide opportunities for maximising more than just our own individual good health.

These guidelines are a source of information and advice and will be a useful addition to Australian health workers' resources. They are available for downloading from www.usda.gov/cnpp.



If you have information, news or comments on current issues that would be of interest to those involved in food and nutrition in either a public health or community health capacity, FOODChain would like to hear from you. Please contact Gill Read as per details on this page.

WHAT'S ON

2-3 August 2000

Australian Health Outcomes Collaboration International Conference. *Health Outcomes for the Nation: Best Bets and Best Buys*
Ph 02 6205 0869 or
Email jan.sansoni@act.gov.au

8 August 2000

Kellogg Nutrition Symposium *The Carbohydrate Advantage – Going the Distance in Weight Management*. Sydney.
Ph 02 9492 7760

12 August 2000

Organic Federation of Australia *Annual General Meeting*. Orange NSW. Ph 03 9386 6600,
Email info@ofa.org.au

3-6 October 2000

5th Annual International Conference on Diabetes and Indigenous Peoples. Christchurch NZ.
Ph NZ (64 3) 364 0893 or
Email diabetes@lynx.co.nz

29 October – 1 November 2000

12th National Health Promotion Conference *Inequalities in Health – Reflecting Back, Stepping Forward*
Melbourne. Ph 03 9682 0244 or
Email health@icms.com.au

15-18 November 2000

6th International Congress of Behavioural Medicine *Behavioural Medicine & Public Health in the New Millennium*. Brisbane. Ph 07 3858 5493 or
Email icbm2000@im.com.au

26-29 November 2000

32nd PHAA Annual Conference *Public Health Futures*. Canberra.
Ph 02 6285 2373 or
Email conference@phaa.net.au

3-6 December 2000

24th Annual Nutrition Society of Australia Scientific Meeting *Emerging Nutrition – Digesting the Evidence*. Perth. Ph 08 8363 1307 or
Email fcceaton@ozemail.com.au

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Health Claims – their history and future

- How do we develop a scientifically sound, robust process for substantiation that can withstand changes in nutrition science?
- What qualifying/disqualifying criteria should be applied to foods before a claim can be made?
- How do we word claims to ensure consumers understand the relationship without making claims too wordy?
- What sort of education should take place for both consumers and health professionals to ensure the claim is understood and used appropriately?
- What monitoring should we undertake to provide us with adequate information about the impact of the claim on consumers, health professionals, industry etc?
- What is the role of industry in a health claims system?
- What level of resources would be required to support the system?
- Who should contribute to the resourcing of the system?

For further information contact: Sue Jeffreson, Australia New Zealand Food Authority, Ph 02 6271 2614; Email sue.jeffreson@anzfa.gov.au

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