

## PARLIAMENT OF AUSTRALIA HOUSE OF REPRESENTATIVES PUBLIC HEARING – INQUIRY INTO DIABETES, DARWIN 7 MARCH 2024.

### THE PROBLEM

Aboriginal and Torres Strait Islander Peoples in remote communities of Australia experience a disproportionate burden of preventable chronic disease including type 2 diabetes and the intergenerational trauma and loss associated with this. Unhealthy diet is a lead contributor to the burden of chronic disease including type 2 diabetes.

Two key modifiable contributors to unhealthy diet in the remote setting of Australia are:

1. High food costs and food affordability
2. Exposure to marketing of unhealthy food and drinks in the retail setting

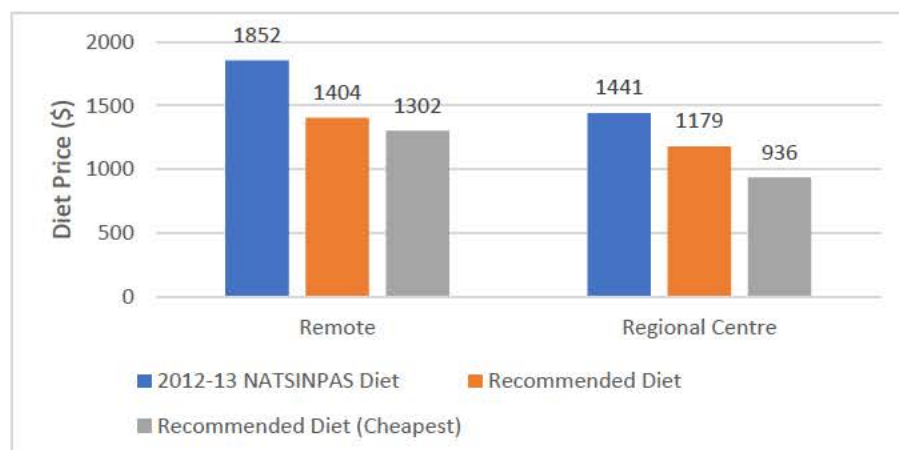
Recommendations have been made to government through numerous Parliamentary Inquiries to address food affordability and healthy diets for Aboriginal and Torres Strait Islander Peoples in remote communities to enjoy the same health status of that of other Australians: For example, House of Representatives Standing Committee on Agriculture 2022, Parliamentary inquiry into food pricing and food security in remote Indigenous communities 2020.

This paper presents new evidence to address this inquiry's terms of reference numbers 2 and 5 and reiterate the urgent need for effective government policy to provide food price subsidies (whilst addressing road and seaway infrastructure needs) for remote Australia and national regulation for restricted marketing of unhealthy food/drinks in food retail as per the Coalition for Remote Healthy Stores submission (No 404) to this Inquiry.

We acknowledge the valuable contribution of community and remote retail knowledge to this research. These data are preliminary and are to be finalised with partners for publication. Partners to this research and study investigators have given permission for this information to be shared for the purpose of the National Diabetes Inquiry.

### NEW EVIDENCE – HIGH FOOD COSTS, FOOD AFFORDABILITY AND DETERMINANTS

As part of a MRFF funded study 'Benchmarking for Healthy Stores', food price data were collected in 29 remote stores and 5 regional centres in the Northern Territory in July/August 2023 using the Aboriginal and Torres Strait Islander Healthy Diets Australian Standardised Affordability and Pricing protocol. An environment scan e-survey<sup>1</sup> exploring environmental factors impacting food retail operations was also completed by representatives of all 29 stores.



**Figure 1.** Estimated fortnight food cost to a 6-person household based on the Healthy Diets ASAP Protocol

NATSINPAS Diet: Diet derived from 2012-13 National and Torres Strait Islander Nutrition and Physical Activity Survey dietary intake data



**Figure 2.** Barriers to healthy in-store operations 2023 (n=29)

<sup>1</sup> van Burgel E, Fairweather M, Hill A, et al. *BMC public health*. 2024;24(1):442-442. doi:10.1186/s12889-024-17945-9

As shown in Figure 1, in 2023 recommended healthy diets for a 6-person household/fortnight (in line with Australian Dietary Guidelines) cost 19% more in remote stores than stores/supermarkets in regional centres and require 42% of a household's income (based on a Centrelink income). Availability of cheaper products in remote stores offered some but limited food cost relief for a healthy diet (\$1302 vs \$1404; 39% of household income). Based on dietary intake patterns reported for Aboriginal and Torres Strait Islander Peoples nationally in 2012/13 (NATSINPAS diet) and 2023 food prices, households may be using over 55% of their income for food (healthy and unhealthy).

Shown in Figure 2, cost of maintenance and repairs (n=21), cost of break-ins (n=21 stores), and cost of freight (n=20) were reported by nearly all stores as barriers to food retail operations. More than forty percent of stores also reported frequency of delivery, road closures/poor road conditions, internet/electricity disruptions and/or other costs (staffing, electricity, and rent) as barriers. Electricity and internet disruptions were experienced at least monthly by 45% and 65% of stores respectively, 45% of stores experienced break-ins at least every 2-3 months, and 13% of stores were impacted by road closures or poor road conditions at least monthly.

Many remote stores have policies that aim to preference the pricing of healthy food. Large store groups such as The Arnhem Land Progress Aboriginal Corporation (ALPA), Outback Stores (OBS), Mai Wiru and Community Enterprise Queensland explicitly aim to address food affordability and reduce preventable chronic disease. Our environment scan survey data indicate that many of the barriers to executing health-enabling store operations are costs and disruptions that are beyond the control of the store and relate to remote conditions and infrastructure. The commonwealth has commitments to improve road and building infrastructure to benefit some stores.<sup>2</sup> Queensland government allocated a \$64 million freight subsidy retailer applied 5.2% discount package on essential goods for Northern Queensland to commence 2024.<sup>3</sup> High food costs for remote communities have been reported as an issue for decades. There is a need for an immediate nation-wide remote healthy food price subsidy. A randomised controlled trial (RCT) conducted with ALPA and OBS (2012-2014) showed a 12% increase in fruit and vegetable intake with a 20% price discount on fruit and vegetables, providing empirical evidence on the effectiveness of price discounts.<sup>4</sup>

## NEW EVIDENCE – EXPOSURE TO MARKETING OF UNHEALTHY FOOD/DRINKS IN FOOD RETAIL

The Coalition for Healthy Remote Stores (the Coalition) submission to this Inquiry, presented evidence to inform government regulation on the marketing (i.e., placement and promotion including price promotion) of unhealthy food in the food retail setting. Based on this evidence, the Northern Territory (NT) Government has incorporated standards and guidelines into their new NT food security program that will effectively restrict retailer marketing of unhealthy food in the remote setting. The Coalition recommends that such regulation be applied nationally for the benefit of all Australians. There are two policy opportunities for this to occur: Through the National Remote Food Security Strategy (under development – for the remote setting) and the Commonwealth Department of Health and Ageing's current consideration of policy to regulate marketing of unhealthy food to children.

The National Diabetes Strategy, The National Obesity Strategy, The National Aboriginal and Torres Strait Islander Health Plan, the National Preventive Health Strategy all recognise that enabling healthy eating environments are needed to achieve the goals and targets of halting the rise in obesity and diabetes and reducing discretionary food to energy from >30% to <20% and free sugars to energy to recommended levels by 2030.

Data from the 29 stores participating in the benchmarking for healthy stores study indicate that on average discretionary (high in fat, sugar and/or salt) food/drinks contribute 41.0% (range 32.7, 60.6) to energy for purchased food/drinks and free sugars contribute 24.8% (range 19.3, 36.2) of energy. The World Health Organisation recommends that free sugars contribute less than 10% of total energy for the prevention of overweight and obesity and dental caries.<sup>5</sup>

Government regulation is urgently needed to achieve these goals and targets by 2030. Bold national policy is needed. A RCT conducted with ALPA showed that retailer restriction on marketing (placement and promotion) of unhealthy food in remote stores resulted in a 2.8% reduction in free sugar to total energy, meaning that free sugar to energy reduced from 26% to 25%.<sup>6</sup> We have preliminary evidence showing sustained free sugar reduction in ALPA stores 24-weeks post end-of-trial (not yet published). ALPA adopted the restricted placement/promotion strategy into their nutrition policy and have achieved further sugar reductions demonstrating real-world effectiveness of such a strategy.

We, Professor Bronwyn Fredericks, Dr Megan Ferguson, Dr Emma McMahon, Adjunct Professor Nicole Turner, Professor Amanda Lee, Professor Louise Maple-Brown, Associate Professor Christine Pollard, Professor Joanne Batstone, Dr Leisa McCarthy and Professor Julie Brimblecombe, acknowledge the Benchmarking for Healthy Stores Research Collaborative and partners in this research, The Arnhem Land Progress Aboriginal Corporation, Outback Stores, Miwatj Health Aboriginal Corporation, Katherine West Health Board Aboriginal Corporation, Sunrise Health Service Aboriginal Corporation and Northern Territory Health and the contribution of the participating stores.

## FOR FURTHER INFORMATION

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<sup>2</sup> Australian Government. [Improving food security in first nations communities](#). Media release 22 Feb 2024

<sup>3</sup> Queensland Government “[Cost of living pressures ease in Far North](#)” 12 Oct 2023

<sup>4</sup> Brimblecombe J et al. [Lancet Public Health](#). DOI:[https://doi.org/10.1016/S2468-2667\(16\)30043-3](https://doi.org/10.1016/S2468-2667(16)30043-3)

<sup>5</sup> World Health Organisation. [Guideline: Sugars intake for adults and children](#). March 2015

<sup>6</sup> Brimblecombe J et al. [Lancet Planetary Health](#). [https://doi.org/10.1016/S2542-5196\(20\)30202-3](https://doi.org/10.1016/S2542-5196(20)30202-3)