



AUSTRALIAN MEDICAL
ASSOCIATION

ABN 37 008 426 793

T | 61 2 6270 5400

F | 61 2 6270 5499

E | info@ama.com.au

W | www.ama.com.au

42 Macquarie St Barton ACT 2600

PO Box 6090 Kingston ACT 2604

AMA submission to the inquiry into food prices and food security in remote Indigenous communities

IndigenousAffairs.reps@aph.gov.au

The Australian Medical Association (AMA) welcomes the opportunity to provide a brief submission to the inquiry into food prices and food security in remote Indigenous communities. The Food and Agriculture Organization of the United Nations asserts that food security exists “when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life”.¹ Based on this declaration, it can be considered that food security for Aboriginal and Torres Strait Islander people in Australia has not yet been achieved.

Aboriginal and Torres Strait Islander people across all parts of Australia, but more significantly in remote areas, experience food insecurity for a range of reasons including poverty, low income levels, and lack of access to affordable and healthy food. Food insecurity among Aboriginal and Torres Strait Islander people in Australia has a long history stemming from colonisation, and today, it is exacerbated by government policies and economic influences.²

There is no doubt that food insecurity is inextricably linked to the much higher rates of chronic disease among Aboriginal and Torres Strait Islander people in Australia.³ The leading contributors to the health gap between Aboriginal and Torres Strait Islander people and their non-Indigenous counterparts directly relate to diet - obesity, high blood cholesterol, alcohol consumption, high blood pressure, and low fruit and vegetable intake.⁴

¹ Food and Agriculture Organisation of the United Nations, 1996. *Rome Declaration on World Food Security and the World Food Summit Plan of Action*. Retrieved from: <http://www.fao.org/3/w3613e/w3613e00.htm>

² Davy D, 2016. *Australia's Efforts to Improve Food Security for Aboriginal and Torres Strait Islander Peoples*, Health and Human Rights Journal, Volume 18, No. 2, Dec 2016.

³ Australian Medical Association, 2018. *Nutrition* (Position Statement). Retrieved from <https://ama.com.au/position-statement/nutrition-2018>

⁴ Al-Yaman, F, 2017. *The Australian Burden of Disease Study: Impact and Causes of Illness and Death in Aboriginal and Torres Strait Islander People, 2011*. Public Health Research & Practice, Vol. 27, Issue 4.

According to the *National Aboriginal and Torres Strait Islander Health Survey 2018-19*, of all Aboriginal and Torres Strait Islander people over the age of 15 living in remote areas, 42% consumed the recommended number of serves of fruit per day, and 24% regularly consumed sugar-sweetened beverages.⁵ This is not surprising given the limited availability of a variety of nutritious foods in remote community stores.⁶

Research has shown that the daily energy intakes of many Aboriginal and Torres Strait Islander people comes from nutrient-poor, energy-dense foods. Take-away and convenience foods, such as soft drinks and microwaveable or deep-fried foods, are often more affordable and readily available than nutrient-rich foods, in remote Aboriginal and Torres Strait Islander community stores.⁶ This is of significant concern given the direct link between poor diet and the development of a chronic disease.

Whilst it is important that healthy foods are readily available in remote community stores, they must also be affordable. It is well known that the cost of food and household incomes are two key factors that influence food choice. Aboriginal and Torres Strait Islander people across the country have relatively low average weekly incomes than non-Indigenous people and are under-represented in the highest income bracket. According to Census data, among Aboriginal and Torres Strait Islander people aged 15 and over in 2011, 68% had a total weekly income below \$600, compared with 51% of non-Indigenous people, and for Aboriginal and Torres Strait Islander people in very remote areas, this rose to 82%.⁷

Despite the lower incomes of people living in remote areas, they pay the highest average price for food in Australia. Research has consistently found that healthy food baskets cost about 20-43% more in remote areas than in major cities, and in some Aboriginal and Torres Strait Islander communities it has been estimated that 34-80% of the family income is needed to purchase healthy diets.⁸ This is compared to 30% for the lowest income Australian households and 14% for the average Australian household. This places significant financial stress on Aboriginal and Torres Strait Islander families, which caused about 1 in 4 households to run out of food in the 12 months prior to 2012-13.⁷

⁵ Australian Bureau of Statistics, 2019. *National Aboriginal and Torres Strait Islander Health Survey, 2018-19*, Cat No. 4715.0, ABS Canberra.

⁶ Dietitians Association of Australia et al. 2016, *Supporting Document for the Joint Policy Statement on: Food Security for Aboriginal & Torres Strait Islander Peoples*, Background Paper. Retrieved from: <https://dietitiansaustralia.org.au/wp-content/uploads/2016/05/Background-Paper-Food-Security.pdf>

⁷ Australian Institute of Health and Welfare, 2015. *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples: 2015*, AIHW, Canberra.

⁸ Public Health Association of Australia, Dietitians Association of Australia & Australian Red Cross, 2013. *Policy at a Glance – Food Security for Aboriginal and Torres Strait Islander Peoples Policy*. Retrieved from: <https://www.phaa.net.au/documents/item/1324>

What is even more concerning, is that there are also significant differences in food prices between stores in remote communities that are in close proximity. In May 2020, the Aboriginal Investment Group published the results from a Market Basket Survey conducted in nine stores in the Top End to show these price differences. As an example, two kilograms of chicken cuts in Barunga costs \$9.40, however just 25 kilometres away in Beswick, the same product costs \$16.80 – almost double the price.⁹ It is questionable how there could be such a significant difference in price for the same product in two nearby locations.

Many factors contribute to the much higher food prices in remote community stores, including freight, store management practices and reduced retail competition. The combination of lower income levels, and higher food prices means that the percentage of income spent on food increases, thus making a healthy diet even more difficult to achieve for Aboriginal and Torres Strait Islander people in remote areas.¹⁰ However, a recent study suggests that cost savings can be accomplished where generic products are substituted for branded products - it suggests that promoting generic products across the core food groups, could be an effective strategy to assist people on low incomes to consume a diet in line with current health guidelines.⁹

The food security challenges faced by Aboriginal and Torres Strait Islander communities highlight the interconnectedness of human rights – the rights to healthy food and good health are intricately linked to the right to adequate housing. Without adequate housing infrastructure such as appropriate food storage, refrigeration, and functioning stoves - the rights to adequate food and good health are greatly compromised and creates or exacerbates a reliance on takeaway food. According to the *Aboriginal and Torres Strait Islander Health Performance Framework Report 2017*, in 2014–15 in remote areas, one in every six (15%) households did not have working facilities for preparing food, compared with 7% in non-remote areas.¹¹ It is critical that adequate, functional housing is available for Aboriginal and Torres Strait Islander people in these areas – without this, health gains will not be achieved.

Government efforts to improve the health and life expectancy of Aboriginal and Torres Strait Islander people in Australia must recognise the potential impacts of improved nutrition on health outcomes, as well as the implications of food insecurity. The 2009 Parliamentary Inquiry *Everybody's Business: Remote Aboriginal and Torres Strait Community Stores* resulted in 33 recommendations to increase the availability and affordability of healthy foods in Outback Stores. This includes the development of an incentive scheme to influence store managers to sell healthy produce and working with individual communities to develop and support good store

⁹Aboriginal Investment Group, 2020. *May 2020 Market Basket Survey*, Retrieved from: <https://aiggroup.org.au/store-prices-responsible-food-insecurity-aboriginal-communities>

¹⁰ Ferguson M, O’Dea K, Chatfield M, Moodie M, Altman J & Brimblecome J, 2015, *The Comparative Cost of Food and Beverages at Remote Indigenous Communities, Northern Territory, Australia*, Australian and New Zealand Journal of Public Health, Vol. 40 (Suppl 1), 2016.

¹¹ Australian Health Ministers’ Advisory Council, 2017. *Aboriginal and Torres Strait Islander Health Performance Framework 2017 Report*, AHMAC, Canberra.

operations or delivery models that recognise the unique needs of communities. However, it appears that some recommendations may have not been implemented.³

Successfully improving food security requires a closer adherence to a human rights-based approach that involves active participation of Aboriginal and Torres Strait Islander people in determining solutions to food insecurity and health-related inequities. Governments must consider the interrelatedness of key human rights in attempts to develop policy and cross-sector collaborations to address food security for Aboriginal and Torres Strait Islander people across Australia.²

The AMA makes the following recommendations to the inquiry, to address food supply and demand issues in remote Aboriginal and Torres Strait Islander communities:

1. The Commonwealth provide appropriate resources to Aboriginal and Torres Strait Islander community-controlled health organisations to support enhanced nutritional literacy, so as consumers, they can assert control over improved food choices; and
2. The Commonwealth undertake economic modelling to determine the cost of implementing appropriate subsidies that incentivize improvements to equity in the food supply, and nutritional options, to remote community stores across Australia.

29 JUNE 2020