



Australian Government

National Health and Medical Research Council

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Select Committee into the Obesity Epidemic in Australia
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Committee Secretary

The National Health and Medical Research Council (NHMRC) welcomes the opportunity to provide a submission to the inquiry of the Select Committee into the Obesity Epidemic in Australia (the Select Committee).

The *National Health and Medical Research Council Act 1992* charges NHMRC with promoting the development of individual and public health standards, fostering national consistency in health standards, supporting research and training, and fostering consideration of relevant ethical issues. This work includes developing guidelines and companion resources that aim to promote the benefits of healthy eating, not only to reduce the risk of diet-related disease but also to improve community health and wellbeing and for the management of overweight and obesity in the Australian population.

In this submission, NHMRC addresses the following aspects of the Select Committee's Terms of Reference:

- e) the effectiveness of existing policies and programs introduced by Australian governments to improve diets and prevent childhood obesity
- f) evidence-based measures and interventions to prevent and reverse childhood obesity, including experiences from overseas jurisdictions

NHMRC acknowledges that the causes of overweight and obesity are complex. Diet and physical activity are central to energy balance, but are directly and indirectly influenced by a wide range of social, environmental, behavioural, genetic and physiological factors. For many individuals, weight gain is hard to avoid and very difficult to reverse. In 2013 NHMRC released:

- [Australian Dietary Guidelines and the Eat for Health resources.](#)
- [Clinical Practice Guidelines for the Management of Overweight and Obesity for Adults, Adolescents and Children in Australia \(Obesity Guidelines\).](#)

These resources are described in more depth in the following pages, and with consideration of the above Terms of Reference. We also include information on current research funding on this topic, and an initiative that is undertaking rapid reviews of the evidence on topics such as nutrition, activity levels and obesity, in partnership with state and territory health departments and other third parties.

1. Australian Dietary Guidelines and Eat for Health resources:

The Australian Dietary Guidelines (ADGs) are aimed at health professionals, policy makers, educators and other interested parties, while the Eat for Health resources are aimed at the general Australian public. These resources provide advice on the amount and kinds of foods that children, adolescents and adults need to eat for health and wellbeing. This includes having a healthy weight, and preventing the risk of food related chronic disease occurring later in life, including obesity. The ADGs consist of five guidelines, with Guidelines One, Two and Three being relevant to this inquiry.

Guideline One – To achieve and maintain a healthy weight, be physically active and choose amounts of nutritious food and drinks to meet your energy needs

- Children and adolescents should eat sufficient nutritious foods to grow and develop normally. They should be physically active every day and their growth should be checked regularly.
- Older people should eat nutritious foods and keep physically active to help maintain muscle strength and a healthy weight.

Guideline Two - Enjoy a wide variety of nutritious foods from these five groups every day:

- Plenty of vegetables, including different types and colours, and legumes/beans.
- Fruit.
- Grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties, such as breads, cereals, rice, pasta, noodles, polenta, couscous, oats, quinoa and barley.
- Lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans.
- Milk, yoghurt, cheese and/or their alternatives, mostly reduced fat (reduced fat milks are not suitable for children under the age of 2 years).

And drink plenty of water.

Guideline Three – Limit intake of foods containing saturated fat, added salt, added sugars and alcohol.

- Limit intake of foods high in saturated fat such as many biscuits, cakes, pastries, pies, processed meats, commercial burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.
 - Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominantly polyunsaturated and monounsaturated fats such as oils, spreads, nut butters/pastes and avocado.
 - Low fat diets are not suitable for children under the age of 2 years.
- Limit intake of foods and drinks containing added salt.
 - Read labels to choose lower sodium options among similar foods.
 - Do not add salt to foods in cooking or at the table.
- Limit intake of foods and drinks containing added sugars such as confectionary, sugar-sweetened soft drinks and cordials, fruit drinks, vitamin waters, energy and sports drinks.
- If you choose to drink alcohol, limit intake. For women who are pregnant, planning a pregnancy or breastfeeding, not drinking alcohol is the safest option.

There are several resources that simplify and promote information from the ADGs such as the [*Healthy eating for children*](#) brochure. This brochure forms part of the 'Eat for Health' resource collection and provides up-to-date advice based on scientific evidence and research about the amount and kinds of foods that children and adolescents need to eat to be healthy. The resource is suitable for parents and carers, and provides relevant information enabling decisions about healthy food choices for children and adolescents. Easy-to-read serving size tables are provided as well as checklists titled 'Encouraging healthy habits' and 'Foods to limit: discretionary choices'.

NHMRC has also developed an interactive Eat for Health website that has an array of easy to use resources including energy calculators and an interactive [food balance game](#). On this, children and adolescents choose healthy food options from the five food groups that form meals and snacks for the whole day. This is a resource that primary school teachers could also use.

This NHMRC suite of resources can assist parents, teachers and carers in enabling children and adolescents to make healthier food choices. Many of these have been disseminated throughout schools and other health professional settings, and continue to be available on the NHMRC and Eat for Health websites.

2. Clinical Practice Guidelines for the Management of Overweight and Obesity for Adults, Adolescents and Children in Australia

The Obesity Guidelines are intended for use by primary care health professionals to monitor and manage overweight and obesity within a clinical context. The guidelines are designed for use primarily at the level of the individual who is overweight or obese, while acknowledging that individual choices are shaped by the wider environmental and social context. A range of health benefits associated with attaining and maintaining a healthy weight are outlined in the guidelines with a focus on combined lifestyle interventions addressing dietary intake, physical activity and behavioural modification. The guidelines also discuss the need for intensive interventions and the role of primary care practitioners in assisting individuals within this context.

The Obesity Guidelines also provide practical advice in the form of checklists, case studies and tips for fostering engagement and discussion about weight management. These were developed in response to targeted and public consultation submissions emphasising the need to address the practicalities of weight management and outlining the evidence for effective weight management strategies. A list of public consultation submissions to the Obesity Guidelines can be found on NHMRC's [public consultation portal](#).

Consultation also identified a need to know where to access quality resources for overweight and obesity management. A summary of tools and resources on overweight and obesity was made available on the [NHMRC website](#). Some initiatives were still in development at the time of publication, and have since been released such as the [Healthy Weight Guide](#).

The Obesity Guidelines include recommendations and practice points for weight management in children and adolescents which are relevant to the Select Committee into the Obesity Epidemic in Australia item f) *evidence-based measures and interventions to prevent and reverse childhood obesity, including experiences from overseas jurisdictions*. The Obesity Guidelines can be accessed through the NHMRC website at www.nhmrc.gov.au.

3. Discretionary Food Guidance – Emerging Project

Dietary patterns characterised by excess dietary saturated fat, sodium, added sugars and alcohol are associated with increased health risk. Foods containing high saturated fat, sodium or added sugars are often considered to be discretionary and sit outside the five core food groups identified in the ADGs. However the ADGs have been criticised for not clearly identifying what foods are considered discretionary. To address this, NHMRC has been commissioned by the Australian Government Department of Health to review the evidence about consumer, clinician, educator and industry understanding of the current 'discretionary' food category associated with the ADGs. NHMRC will report on possible definitions of discretionary food and drinks suggested by the review that could support the ADGs, be tested in further consultation activities, and be used in a range of policy contexts.

4. The Australian Prevention Partnership Centre

NHMRC jointly funds The Australian Prevention Partnership Centre (TAPPC), which is part of NHMRC's Partnerships for Better Health initiative to improve the availability and quality of research evidence for clinicians, managers and policy makers. TAPPC brings teams of researchers and health decision-makers together to work collaboratively on systems approaches to preventing lifestyle-related chronic conditions. TAPPC's work has

included research related to risk factors for chronic conditions, such as overweight and obesity, physical inactivity and unhealthy diets.

TAPPC was established in 2013 for a period of five years, with NHMRC contributing \$11.3 million to the total value of \$22.6 million committed by all funding partners. TAPPC has recently been renewed for a further five years (2018-2023), with NHMRC contributing \$7.7 million to the total value of \$15.8 million for the centre.

Obesity Research Funding

NHMRC provided funding of \$174.4 million for obesity research between 2013 and 2017. Of this, \$34.6 million was specifically for childhood obesity. In 2015 NHMRC opened a Targeted Call for Research (TCR) into Engaging and Retaining Young Adults in Interventions to Improve Eating Behaviours and Health Outcomes. The aims of this TCR were to stimulate the research required to build a robust body of evidence on effective lifestyle intervention programs in young adults and to encourage multidisciplinary collaborations with a view to developing more successful interventions. Five applications were funded by NHMRC in 2016.

I trust this information is of assistance to your Inquiry into the Obesity Epidemic in Australia.

Tony Kingdon
A/g Chief Executive Officer

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