

Submission from Cancer Council NSW to the Parliament of NSW Inquiry into Childhood Overweight and Obesity

August 2016

Summary

Cancer Council NSW supports initiatives to lower overweight and obesity rates in children because a high proportion of overweight children will go on to be overweight in adulthood, putting them at higher risk of eleven different cancers. Overweight and obesity is linked to cancer of the bowel, breast (post-menopausal), stomach, kidney, gallbladder, liver, pancreas, oesophagus, endometrium, ovarian and advanced prostate.

Cancer Council NSW commends the NSW Premier for his leadership in recognising the importance of addressing childhood overweight and obesity as one of 12 Premier's priorities, and establishing the ambitious but critical target of reducing rates of childhood obesity in NSW by 5% over 10 years. Cancer Council NSW is committed to supporting the NSW Government to achieve this goal however, a comprehensive approach will be needed.

This submission addresses four of the seven focus areas outlined in the terms of reference:

- a) Current approaches to reduce childhood overweight and obesity in NSW
- b) Strategies to assist parents and carers in enabling their children to make healthier food and beverage choices and be active, including by participating in sport
- c) Measures to support 13 to 18 year olds to make healthier food and beverage choices and be active, including by participating in sport
- f) The potential for collaboration on strategies to reduce childhood overweight and obesity with the non-government and private sectors.

Recommendations:

Recommendation 1: The NSW Government, through the Council of Australian Governments and the Legislative and Governance Forum on Food Regulation, advocate for the development of a National Nutrition Policy to provide an overarching framework to identify, prioritise, drive and monitor nutrition and diet related issues; and ensure the availability of affordable, accessible nutritious food for all Australians.

Recommendation 2: Expand the Make Healthy Normal campaign and provide simple and clear healthy eating information based on the Australian Guide to Healthy Eating, for everyone regardless of their nutrition literacy.

Recommendation 3: The NSW Government should ensure children are protected from unhealthy advertising in settings within state government control including outdoor advertising, shopping centres and food retail outlets such as supermarkets, cinemas and local radio, restaurants/cafes including quick-service outlets, licensed clubs and hotels, sporting clubs and organisations, NSW Government-owned venues.

Recommendation 4: The Premier should show national leadership through the Council of Australian Government, by championing the development of a comprehensive regulatory approach to protect children from the unhealthy influence of food marketing:

- a) Protecting the health of children over corporate interests

- b) Encompassing all media and forms of marketing, including TV, radio and print advertising, online marketing, food company websites and apps, social media, sports sponsorship, on-pack and in-store promotions and outdoor advertising
- c) Applying to marketing that is directed to children aged under 16 years, or to which a high number of children under 16 years are likely to be exposed
- d) Using independently-developed and consistent nutrition criteria to ensure only healthy foods are promoted to children
- e) Including independent, clear and transparent monitoring and enforcement processes.

Recommendation 5: Improve and strengthen existing kilojoule labelling scheme by:

- a) Enhancing monitoring and enforcement efforts
- b) Requiring fast food chains to provide in-store the kilojoule values for all menu items and meals available, either on the menu board or other in-store information
- c) Introducing and enforcing stricter guidelines on how kilojoules must be displayed on menu boards, to enable consumers to see and use the kilojoules labels
- d) Investigating the provision of more nutrition information (saturated fat, sugar and salt) at point of purchase.

Recommendation 6: The NSW Government should show leadership, through the Council of Australian Governments and the Legislative and Governance Forum on Food Regulation, by seeking improvements to food labelling initiatives to support consumers to make healthy choices. These include:

- a) Extending the application of the Nutrient Profiling Scoring Criteria to the regulation of nutrition content claims
- b) Requiring pre-market approval of food and nutrient-health relationships
- c) Ensuring the Health Star Rating system is improved to better promote foods consistent with the Australian Dietary Guidelines
- d) Endorsing mandatory implementation of Health Star Ratings on all packaged food products.

Recommendation 7: The NSW Government should lead comprehensive action by governments, schools, non-government organisations and others to inform the public about the health impacts of sugar-sweetened beverages and to influence the public to limit their consumption. A comprehensive approach should include:

- a) Advocating for the implementation of a sugar-sweetened beverage tax by the Australian Government to effect a price increase of at least 20%, and consider the broader application of food taxes and subsidies aimed at changing purchasing habits, achieving healthier diets and raising revenue for obesity/weight reduction programs
- b) Funding a social marketing campaign to highlight the health impacts of sugar-sweetened beverages consumption and encourage people to reduce their levels of consumption
- c) Introducing comprehensive restrictions to reduce children's exposure to marketing of sugar-sweetened beverages, including through schools and children's sports, events and activities
- d) Restricting the sale of sugar-sweetened beverages in all schools (primary and secondary), places frequented by children, such as activity centres and at children's sports and events (with adequate resources to ensure effective implementation, monitoring and evaluation)
- e) Investigating the steps state and local governments can take to reduce the availability of sugar-sweetened beverages in workplaces, government institutions, health care settings and other public places.

Recommendation 8: Local governments should be empowered to promote public health and obesity prevention by:

- a) Including public health and obesity prevention as an objective in state planning laws
- b) Including public health and obesity prevention as an objective in local council strategic, environment and/or development control plans.

Recommendation 9: The Ministry of Health should explore further partnerships with Cancer Council NSW to expand delivery the *Eat It to Beat It* program across NSW in order to increase fruit and vegetable consumption, which can help to deliver weight management benefits.

Introduction

Cancer Council NSW appreciates the opportunity to provide this submission to the NSW Legislative Council Inquiry into Childhood Overweight and Obesity.

Cancer Council NSW is committed to reducing the impact of cancer on individuals and the community, and to lessening the burden for people affected by cancer. Preventing cancer is one of the most effective ways of beating cancer. More than a third of cancers are related to smoking, overexposure to the sun, being overweight and obese, poor nutrition, alcohol consumption and lack of physical activity. Many cancers can be prevented by helping people make healthier choices every day, and by creating environments that promote cancer-smart behaviours and reduce exposure to known cancer risks. We are community funded and community focused.

Nearly 4,000 new Australian cancer cases or 3.4% of all new cancer cases diagnosed in 2010 could be attributed to overweight and obesity.¹ Overweight and obesity has been linked to more than 10% of bowel cancers and 8% of breast cancers as well as nine other cancers; cancer of the stomach, kidney, gallbladder, liver, pancreas, oesophagus, endometrium, ovarian and advanced prostate.^{1;2}

Cancer Council NSW supports initiatives to lower overweight and obesity rates in children because a high proportion of overweight children will go on to be overweight in adulthood.^{3;4} A recent systematic review and meta-analysis found over half obese children go on to be obese in adolescence and around 70% of obese adolescents were still obese over age 30.⁵

Cancer Council NSW commends the NSW Premier for his leadership in recognising the importance of addressing childhood overweight and obesity as one of 12 Premier's priorities, and establishing the ambitious but critical target of reducing rates of childhood obesity in NSW by 5% over 10 years. Cancer Council NSW is committed to supporting the NSW Government to achieve this goal however, a comprehensive approach will be needed.

Cancer Council NSW's involvement in the NSW Health Premier's Priority: Childhood Obesity Implementation Committee means we've been privileged to see the compelling evidence set out in the rapid evidence review into obesity prevention in children and young people, commissioned by the NSW Ministry of Health and conducted by the University of Sydney Physical Activity, Nutrition and Obesity Research Group (PANORG). In addition to highlighting the success of a number of existing NSW Ministry of Health programs designed to address childhood obesity and promote healthy eating habits for children, this report very clearly highlighted the two most cost effective obesity prevention interventions for children and young people were regulation of junk food marketing and a sugar sweetened beverages tax. While both issues could be perceived as being the jurisdiction of the Commonwealth government

alone, there are opportunities for the Premier and Minister for Health to intervene in these areas by changing state regulation and championing national change through the Council of Australian Government.

Cancer Council NSW recommends a suite of evidence-based initiatives and interventions to address obesity as outlined in the World Cancer Research Fund International’s NOURISHING framework.⁶ The framework highlights 10 policy areas where governments must take action to promote healthy diets and the prevention of obesity and diet-related chronic diseases (see table below).

The policy areas address three key domains: the food environment, the food system and behaviour change communication. The framework also provides an extensive portfolio of government actions from around the world in ten policy areas. We encourage members of the Committee on Social Issues to review the framework and associated policy actions. (<http://www.wcrf.org/int/policy/nourishing-framework>).

World Cancer Research Fund International Nourishing Framework⁶		
DOMAIN		POLICY AREA
FOOD ENVIRONMENT	N	Nutrition label standards and regulations on the use of claims and implied claims on foods
	O	Offer healthy foods and set standards in public institutions and other specific settings
	U	Use economic tools to address food affordability and purchase incentives
	R	Restrict food advertising and other forms of commercial promotion
	I	Improve the nutritional quality of the whole food supply
	S	Set incentives and rules to create a healthy retail and food service environment
FOOD SYSTEM	H	Harness the food supply chain and actions across sectors to ensure coherence with health
BEHAVIOUR CHANGE COMMUNICATION	I	Inform people about food and nutrition through public awareness
	N	Nutrition advice and counselling in health care settings
	G	Give nutrition education and skills

While addressing childhood obesity will require a comprehensive and multifaceted approach across a range of sectors and involving initiatives in many of the areas listed above, Cancer Council NSW has outlined below a number of areas we see as the most cost-effective

interventions that should be the priority areas for action in Australian and New South Wales governments.

a) Current approaches to reduce childhood overweight and obesity in NSW

Cancer Council NSW commends the NSW government on the existing suite of programs and initiatives designed to address overweight and obesity, and promote healthy eating and physical activity. In particular, these include:

- The *Get Healthy Coaching and Information Service* particularly the more recent focus on overweight and obesity among pregnant women
- *Munch and Move* promoting healthy eating and physical activity in the pre-school setting
- *Live Life Well @ School* promoting healthy eating and physical activity in the primary school setting
- *Finish with the Right Stuff* promoting water, fruit and healthy canteens in selected junior sports settings
- *Go 4 Fun*, a healthy lifestyle program for overweight and obese children and their families designed to improve eating habits, fitness and confidence
- The *Make Healthy Normal* social marketing campaign promoting healthy weight, including the proposed expansion to focus on healthy weight among families
- The *Fresh Tastes @ Schools* healthy school canteens policy, that aims to ensure school canteens promote and role model healthy food choices
- *Fast Choices* menu labelling legislation to encourage healthier fast food choices by providing consumers with kilojoule information at the point of sale in major fast food chains, supported by the *8700kJ* social marketing campaign and app.

We also commend the NSW Government for their continued commitment to funding evaluation of these programs to ensure responsible government investment in programs that deliver measurable health benefits across the community. Cancer Council NSW supports the commitment of further resources to expand the reach and effectiveness of these existing interventions, however we also note the recommendations of the PANORG rapid evidence review that these existing programs alone will not be sufficient to achieve the Premier's goal of reducing childhood obesity rates by 5% in 10 years.

b) Strategies to assist parents and carers in enabling their children to make healthier food and beverage choices and be active, including by participating in sport

AND

c) Measures to support 13 to 18 year olds to make healthier food and beverage choices and be active, including by participating in sport

To address the increase in non-communicable diseases including the increase in obesity rates, the World Health Organization has recommended population-based policies such as influencing the food environment through cost-effective and low-cost population-wide

interventions such as restrictions on marketing of foods and beverages that are high in sugar, salt and fat to children and fiscal policies to increase the availability and consumption of healthy food and reduce consumption of unhealthy ones.^{7,8} The food environment is also a focus in the World Cancer Research Fund's NOURISHING framework that outlines food policy initiatives that governments may adopt to promote healthy diets and reduce obesity and obesity-related cancers.⁹

The Australian Government supported National Preventative Health Strategy's recommendations to investigate the use of taxation and/or incentives to promote consumption of healthier foods; introduce food labelling on front of pack and menus to support healthier food choices; and to reduce exposure of children and others to the promotion of energy-dense nutrient-poor foods and beverages.¹⁰

1. Support the development of a National Nutrition Policy

The Final Report of the *Review of Food Labelling Law and Policy*,¹¹ which was commissioned by the Legislative and Governance Forum on Food Regulation, recommended that a comprehensive National Nutrition Policy be developed. The Legislative and Governance Forum on Food Regulation, which includes representation from states, territory and Commonwealth governments, agreed to develop a comprehensive National Nutrition Policy.

The National Nutrition Policy was intended to provide an overarching framework to identify, prioritise, drive and monitor nutrition and food policy initiatives within the context of the all governments' preventive health agendas. The Commonwealth government facilitated a small targeted consultation workshop and commissioned the development of a scoping document in 2013. However, there has been no further commitment from the Commonwealth government to progress the development of a National Nutrition Policy.

Recommendation 1: The NSW Government, through the Council of Australian Governments and the Legislative and Governance Forum on Food Regulation, should advocate for the development of a National Nutrition Policy to provide an overarching framework to identify, prioritise, drive and monitor nutrition and diet related issues; and ensure the availability of affordable, accessible nutritious food for all Australians.

2. Provide information supporting healthy eating

Cancer Council NSW recognises that the Make Healthy Normal campaign aims to address overweight and obesity levels in the NSW community by promoting healthy eating and physical activity. We feel there is considerable scope to extend the reach of this campaign to a broader audience including families, culturally and linguistically diverse and low literacy groups; and provide specific actionable healthy eating advice consistent with the recommendations of the Australian Dietary Guidelines and the Australian Guide to Healthy Eating.

Recommendation 2: Expand the Make Healthy Normal campaign and provide simple and clear healthy information based on the Australian Guide to Healthy Eating, for everyone regardless of their nutrition literacy.

3. Address the food environment

a. Protecting children from the harms of unhealthy food advertising

Food marketing is one contributing factor to the obesogenic environment in Australia. The World Health Organization in the *Diet, Nutrition and the Prevention of Chronic Diseases Report* concluded that the heavy marketing of fast food and energy-dense micronutrient-poor foods and beverages is a 'probable' causal factor in weight gain and obesity, and is a target for preventive action.¹² Systematic reviews on food marketing to children indicate that food and beverage marketing influences the preferences and purchase requests of children, influences consumption at least in the short term, is a likely contributor to less healthful diets and may contribute to negative diet-related health outcomes and risks among children and youth.¹³⁻¹⁵ The majority of foods promoted to children are energy-dense nutrient-poor.¹⁴ There is now a body of evidence that indicates food marketing is a modifiable risk factor for children's health.¹⁴

In Australia, food marketing to children is regulated under a combination of limited government regulation, implemented by the communications regulator and voluntary advertising and food industry initiatives.¹⁶ This may give the false impression that food advertising to children is well regulated. However, the loopholes, gaps and continued exposure of children to advertisements for unhealthy foods suggest that the current approach is inadequate. Such loopholes include:

- Junk food advertisements can appear during programs which are most popular with children (e.g. Masterchef and Home & Away), if the programs are also popular with other audiences.
- Advertisements are allowed if they are directed to parents and not directly targeted to children yet these ads may still appeal to children. In one study of television advertisements, only 3% of food advertisements made a direct address to children, while many more used techniques that would appeal to children, such as images of children enjoying themselves, consuming the advertised product and playing with friends.
- There is no uniform criteria to assess the 'healthiness' of foods advertised to children and companies establish their own nutrient criteria. For example, Kellogg's Coco Pops contain 36% sugar and are low in fibre yet Kellogg criteria consider it a healthier food that is appropriate to market to children. In the case of fast food, only dedicated children's meals are covered. This means that individual menu items such as burgers and limited time only offers and family meals can still be promoted to children even though a child's portion of a family meal exceeds the maximum amount of unhealthy nutrients that a meal should provide.
- Company-owned websites and apps often feature children's games, however 35% or more of website visitors have to be children for the food marketing restrictions to apply.

Children's exposure to food advertising that promotes unhealthy foods can be reduced by improving existing regulations. Regulation of food marketing to children should:

- Protect the health of children over corporate interests
- Encompass all media and forms of marketing, including TV, radio and print advertising, online marketing, food company websites and apps, social media, sports sponsorship, on-pack and in-store promotions and outdoor advertising
- Apply to marketing that is directed to children aged under 16 years, or to which a high number of children under 16 years are likely to be exposed
- Use independently-developed and consistent nutrition criteria to ensure only healthy foods are promoted to children
- Include independent, clear and transparent monitoring and enforcement processes.

Studies comparing potential interventions to address obesity have shown restricting unhealthy food marketing on television has the greatest overall effect (although small per child)¹⁷ and would be the most cost effective intervention.¹⁸ As noted above, the PANORG rapid evidence review (as yet unpublished) commissioned by the NSW Ministry of Health, identified food marketing regulation as one of the two most cost effective childhood obesity interventions.

Reducing children and young people's exposure to the marketing and advertising of unhealthy foods is included under Strategic Direction 1 in the *NSW Healthy Eating and Active Living Strategy: Preventing overweight and obesity in New South Wales 2013-2018*.¹⁹ There is limited evidence of government action in this area to date. In 2015, the ACT Government carried out a consultation to inform the development of actions to increase the marketing of healthy food and drink and reduce the marketing of unhealthy food and drink, particularly those aimed at children.²⁰ The ACT Government has released a summary of more than 500 responses to the consultation. Overall, there was strong community support for reducing the marketing of unhealthy food and drinks, and increasing the availability and promotion of healthier options.²¹ The ACT government is now investigating the next steps in light of this consultation. We would encourage the NSW Government of undertake a similar exercise.

Public support is strong for regulation of marketing to children.²² The 2013 NSW Community Survey on Cancer Prevention, assessed community attitudes to a number of cancer prevention initiatives.²³ Nearly three quarters of respondents (73%) supported a ban on unhealthy food advertising that targets children. More than three quarters of parent respondents identified appealing food packaging; celebrities endorsements and product characters; school vending machines, supermarket checkouts, competitions and giveaways; and TV advertising as the biggest areas of concern. Three quarters (75%) of parents did not agree that current regulation adequately protected children from exposure to TV advertising of unhealthy foods.

Recommendation 3: The NSW Government should ensure children are protected from unhealthy advertising in settings within state government control including outdoor advertising, shopping centres and food retail outlets such as supermarkets, cinemas and local radio, restaurants/cafes including quick-service outlets, licensed clubs and hotels, sporting clubs and organisations, NSW Government-owned venues.

Recommendation 4: The Premier should show national leadership through the Council of Australian Government, by championing the development of a comprehensive regulatory approach to protect children from the unhealthy influence of food marketing:

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- Using independently-developed and consistent nutrition criteria to ensure only healthy foods are promoted to children
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b. Better food labelling so that the healthy choice is the easy choice

Consumption of foods purchased away from home are important to public health efforts to reduce obesity, as many of these foods are high in energy, sugars, saturated fat and

sodium.^{24:25} Frequent consumption of fast foods has been linked to weight gain.²⁶ In recent years, Australians have spent increasing proportions of household expenditure on fast foods and eating out.^{27:28} It is important to reduce the impact of unhealthy fast food environments on poor food choices, and enable consumers to make healthier choices when eating away from home. The NSW Government has shown leadership by being the first state to establish menu labelling requiring fast food chains to display the kilojoule content of menu items.²⁹ This was an important and symbolic first step, however Cancer Council NSW's own research has identified that not all chains or outlets are complying with this legislation and customers do not have access to kilojoule information for all menu items.³⁰

Recommendation 5: Improve and strengthen existing kilojoule labelling scheme by:

- a) Enhancing monitoring and enforcement efforts
- b) Requiring fast food chains to provide in-store the kilojoule values for all menu items and meals available, either on the menu board or other in-store information
- c) Introducing and enforcing stricter guidelines on how kilojoules must be displayed on menu boards, to enable consumers to see and use the kilojoules labels
- d) Investigating the provision of more nutrition information (saturated fat, sugar and salt) at point of purchase.

The nutritional status of Australians is typified by an increasing intake of unhealthy, discretionary food and beverages^{31:32} and is exacerbated by a supermarket environment with high levels of snack food and soft drink displays³³ and advertising for unhealthy foods.³⁴ Shelf space for energy-dense foods and drinks is greater in stores in socio-economically disadvantaged neighbourhoods.³⁵

A simple, clear method of labelling foods, for use in conjunction with the Nutrition Information Panel has the potential to provide nutrition information equitably for large numbers of shoppers.³⁶

Many food labels also include health and nutrition content claims that are marketing tools used to draw attention to specific nutritional aspects or potential health benefits of products.³⁷ Products carrying claims may be perceived by consumers as healthier than those that do not carry claims.^{38:39} Therefore it is important to ensure that the products carrying claims are healthier options.

Claims are regulated in a step-wise manner in Australia under the Australia New Zealand Food Standards Code.⁴⁰ Nutrition content claims such as 'high in calcium' can appear on any product carrying specified amounts of the nutrient claimed, regardless of whether the product is healthy. The Food Standards Code prohibits health claims, such as 'contains calcium for healthy bones' on unhealthy products that do not meet established Nutrient Profiling Scoring Criteria. General level health claims can be made for the 200 pre-approved food-health relationships, or the food industry can self-substantiate a food-health relationship by preparing a systematic review. High level health claims on serious diseases or biomarkers of serious diseases, such as 'contains calcium to prevent osteoporosis', must meet the requirements for general level health claims and be pre-approved by Food Standards Australia New Zealand.

There are two weaknesses of this system that can result in consumers being unduly influenced by nutrition and health claims on food labels. Firstly, the fact any product can make nutrient content claims regardless of whether it meets Nutrient Profiling Scoring Criteria means it is common to find sugary breakfast cereals promoted as a source of vitamins and minerals,

potato crisps claiming to be lower in saturated fats despite being high in kilojoules, total fat and sodium, and confectionary products claiming to be 99% fat free.

A second weakness is the permission that food companies can substantiate their own health claims. The onus is on food companies to compile and interpret the evidence when many do not have staff with expertise in conducting systematic literature reviews. This in turn relies on state enforcement agencies having the capacity and skills to assess the company's evidence and decide whether there is sufficient, good quality evidence for the food company to make the claim. Therefore, there is significant potential for the food industry to make claims based on poor-quality research.

Given the long-established influence that claims have on product purchases,⁴¹ the potential for consumers to be misled based on health claims that have little scientific evidence, and nutrition content claims appearing on unhealthy products, it is important to advocate for stricter regulations on this aspect of food labelling.

In June 2013, the Legislative and Governance Forum on Food Regulation agreed to a voluntary front-of-pack labelling system for all packaged, manufactured or processed foods.⁴² The Health Star Rating scheme include an interpretive star rating element underpinned by an algorithm that indicates the overall healthiness of the food, with a half star rating for least healthy and up to five stars for the most healthy food.⁴² As well, the system shows nutrition information for energy, saturated fat, sugars and sodium and another optional nutrient e.g. calcium or fibre.⁴²

In 2014, the algorithm for the nutrient profiling was finalised⁴³ and a style guide for application of the Health Star Rating System was developed.⁴⁴ The Health Star Rating is appearing on some foods in the supermarket. A communication campaign including launch of a website and communication and education material for consumers began in 2015.

Cancer Council NSW supports the Health Star Rating scheme and was represented on the Technical Design Working Group, alongside other public health, consumer, food industry and government representatives. However, since the schemes implementation it has become evident that a number of improvements need to be made to ensure that it reinforces the recommendations of the Australian Guide to Healthy Eating by awarding core foods higher star ratings while discretionary foods receive lower star ratings.

Recommendation 6: The NSW Government should show leadership, through the Council of Australian Governments and the Legislative and Governance Forum on Food Regulation, by seeking improvements to food labelling initiatives to support consumers to make healthy choices. These include:

- a) Extending the application of the Nutrient Profiling Scoring Criteria to the regulation of nutrition content claims
- b) Requiring pre-market approval of food and nutrient-health relationships
- c) Ensuring the Health Star Rating system is improved to better promote foods consistent with the Australian Dietary Guidelines
- d) Endorsing mandatory implementation of Health Star Ratings on all packaged food products.

c. Interventions to reduce consumption of sugar-sweetened beverages

Systematic reviews of the evidence have consistently found a significant association between sugar-sweetened beverages consumption and increased energy intake.⁴⁵⁻⁴⁷ While various studies have found different effects and effect sizes (due largely to differences in study methodologies, sample characteristics and definitions in variables), there is also evidence of at least a probable association between sugar-sweetened beverages consumption and weight gain, body mass index, overweight and obesity (among adults and children).⁴⁵⁻⁴⁸ With respect to sugar-sweetened soft drinks in particular, research indicates that people do not compensate for the additional energy they consume from these drinks by reducing consumption of other foods, leading to increased total energy intake.^{45;49;50}

The consumption of added sugar by adolescents, with the greatest source being sugar-sweetened soft drinks, has been associated with multiple factors related to the increased risk of cardiovascular disease, including increased dyslipidaemia (lower HDL 'good' cholesterol levels and higher LDL 'bad' cholesterol levels) among adolescents regardless of body size and increased insulin resistance among those that are overweight or obese.⁵¹

The Australian Dietary Guidelines recommend limiting the intake of foods and drinks containing added sugars and in particular, limiting sugar-sweetened soft drinks.⁴⁸ These recommendations have been based on evidence of a probable association (Grade B evidence) between sugar-sweetened beverage consumption and an increased risk of weight gain in adults and children.⁴⁸ They are also based on evidence of a suggestive association (Grade C evidence) between soft drink consumption and an increased risk of dental caries in children, as well as an increased risk (from cola drinks) of reduced bone strength.⁴⁸

There is evidence that sugar-sweetened beverages continue to be consumed by large numbers of adults and children in Australia.^{52;53} While the sale of sugar-sweetened soft drinks may have decreased over the past decade, and the sale of other sugar-sweetened beverages has increased, sugar sweetened soft drinks continue to hold the largest volume share of 'water based beverage' sales in Australia (this excludes milk based drinks, fruit juice, cordials and tap water).^{54;55} In 2006, Australia was among the top 10 countries for per capita consumption of soft drinks.⁵⁶ Young men (19–24 years of age) and male adolescents (12–18 years of age) are the highest consumers of sugar-sweetened beverages, including sugar-sweetened soft drinks, and across all age groups, males are higher consumers than females.^{52;53;57;58}

The 2007 Australian National Children's Nutrition and Physical Activity Survey found 47% of children (aged two to 16 years) consumed sugar-sweetened beverages daily (including sugar-sweetened soft drinks, cordials, fruit drinks, sports drinks and energy drinks).⁵⁹ Sugar-sweetened soft drinks were consumed daily by 25% of children (aged two to 16 years), with a mean daily intake among these children of approximately 1.2 cans – between 436 mL and 448 mL per day.^{52;54;59} Among children, consumption of all sugar-sweetened beverages and sugar-sweetened soft drinks increase with age, with adolescent boys being the highest consumers.^{52-54;58;59} Among children aged two to 16 years that consumed sugar-sweetened soft drinks, these drinks contributed 26% of their daily sugar intake, 13% of their total carbohydrate intake and 7% of their total energy intake.⁵²

Recommendation 7: The NSW Government should lead comprehensive action by governments, schools, non-government organisations and others to inform the public about the health impacts of sugar-sweetened beverages and to influence the public to limit their consumption. A comprehensive approach should include:

- a) Advocating for the implementation of a sugar-sweetened beverage tax by the Australian Government to effect a price increase of at least 20%, and consider the broader application of food taxes and subsidies aimed at changing purchasing habits, achieving healthier diets and raising revenue for obesity/weight reduction programs
- b) Funding a social marketing campaign to highlight the health impacts of sugar-sweetened beverages consumption and encourage people to reduce their levels of consumption
- c) Introducing comprehensive restrictions to reduce children's exposure to marketing of sugar-sweetened beverages, including through schools and children's sports, events and activities
- d) Restricting the sale of sugar-sweetened beverages in all schools (primary and secondary), places frequented by children, such as activity centres and at children's sports and events (with adequate resources to ensure effective implementation, monitoring and evaluation)
- e) Investigating the steps state and local governments can take to reduce the availability of sugar-sweetened beverages in workplaces, government institutions, health care settings and other public places.

d. Include public health as an objective in planning laws to enable local government to limit access to unhealthy food and encourage access to healthy food.

Local governments share responsibility for protecting health and safety, and therefore have a role in preventing childhood overweight and obesity. This includes limiting access to and the promotion of unhealthy foods, improving access to healthier foods and encouraging physical activity.

One area of local government responsibility that could be improved relates to planning and development approvals, specifically for unhealthy food outlets such as fast food chains. There have been a number of recent examples of development applications from major fast food chains that would see these fast food chains located close to schools.

Planning laws should include an objective around health and wellbeing to align with health priorities including obesity and support local council initiatives to shape healthy food environments.⁶⁰ Including public health considerations in planning regulation supports 'health in all' policies and shows that health is everyone's responsibility.⁶¹ Local government should also be required to include public health and obesity prevention in their strategic plans.

Recommendation 8: Local governments should be empowered to promote public health and obesity prevention by:

- a) Including public health and obesity prevention be as an objective state planning laws
- b) Including public health and obesity prevention be as an objective local council strategic, environment and/or development control plans.

f) The potential for collaboration on strategies to reduce childhood overweight and obesity with the non-government and private sectors

Background to the *Eat It To Beat It* program

The *Eat It To Beat It* program is Cancer Council NSW's flagship nutrition promotion program, designed to promote the importance of healthy eating, specifically fruit and vegetable consumption, in preventing cancer. The aim of the *Eat It To Beat It* program is to increase consumption of fruit and vegetables in NSW parents of school aged children exposed to the program strategies.

Increasing the proportion of Australians who consume the recommended intake of fruit, vegetables and fibre could prevent up to 4% of all cancers.⁶² Around 50% of NSW adults are not consuming the recommended two serves of fruit each day and less than 10% are consuming the recommended five serves of vegetables each day.⁶³ There is evidence to suggest that fruits and vegetables protect against mouth, pharynx, larynx, oesophageal, stomach, nasopharynx, lung, colorectal, ovarian, endometrium, stomach, cervical, prostate, pancreatic and liver cancers.⁶⁴ More limited evidence suggests that when consumed as part of a healthy diet low in fat, sugar and salt, fruits and vegetables may also help to reduce the risk of obesity, an independent risk factor for cancer.¹² Further, eating an increase of fruit and vegetable intake by just 50 grams a day can reduce overall mortality risk by around 20%.⁶⁵

In 2008, Cancer Council NSW recognised the need for a practical community-based program that addresses some of the barriers to fruit and vegetable consumption and identified an opportunity to improve fruit and vegetable consumption by targeting parents of primary school aged children through the establishment of the peer-led *Eat It To Beat It* program. Evidence suggests that encouraging parents to be positive role models by targeting parental intake and creating a supportive home environment through increased encouragement and availability of fruit and vegetables are positively associated with children's fruit and vegetable consumption. Therefore, the *Eat It To Beat It* program targets NSW parents or carers of primary school aged children in order to improve health and wellbeing and to help prevent chronic disease in the family unit. Eating habits learned in childhood are likely to be carried forward to adulthood, so instilling good eating habits early is important.

About the *Eat It To Beat It* program

The *Eat It To Beat It* program was developed and piloted in the Hunter region in 2008-11, and then rolled out across selected areas of NSW 2012-15. Since July 2016, *Eat It To Beat It* has been delivered across the state.

The objectives of the program are to:

1. Increase awareness of the health benefits of fruit and vegetables
2. Increase knowledge about the recommended intakes of fruit and vegetables
3. Improve attitudes towards the consumption of fruit and vegetables
4. Improve the skills and self-efficiency of parents in providing adequate amounts of fruit and vegetables for their family
5. Overcome or minimise the barriers to the consumption of fruit and vegetables.

The *Eat It To Beat It* program is a multi-strategy, volunteer-led intervention consisting of the following components:

- Program Facilitator training: Full day training workshop for volunteers followed by a competency assessment;
- Fruit & Veg Sense workshop: 90 minute volunteer facilitated education session for parents covering topics such as recommended daily intake of fruit and vegetables, serve size, food budgeting, menu planning, family friendly recipes and how to deal with fussy eaters. Parents who attend the workshop also receive a recipe book, fridge magnet, and menu planning tools;
- Healthy Lunch Box session: 25 minute presentation primarily held as part of the Kindergarten Orientation program run by schools. The sessions highlight the recommended daily intake of fruit and vegetables, serve size and what food groups should be included to ensure that parents are packing a healthy lunch box. Each family who attends also receives a show bag which includes a Healthy Lunch Box kit, a weekly meal planner to attach to the fridge, fruit and vegetable snack ideas, and a fridge magnet which outlines fruit and vegetable serve sizes; and
- Other media and communications: a communication strategy including school newsletter Nutrition Snippets, local media and community networks to raise awareness of the program and key messages. This strategy includes a Facebook page and other social media channels, recipes and factsheets, and the *Eat It To Beat It* website. Nutrition Snippets for school newsletters are short pieces of nutrition information that are designed to be included in school and community newsletters.

Cancer Council NSW recognised that in order to increase fruit and vegetable consumption and healthy eating habits among socially excluded and hard to reach groups, new strategies needed to be developed or existing strategies modified to better reach and meet the needs of these groups. The *Eat It To Beat It* programs social inclusion priorities include:

- Fruit & Veg Made Easy workshop: a modified version of the 90 minute Fruit & Veg Sense workshop targeting disadvantaged parents through social welfare organisations. The Fruit & Veg Made Easy workshops utilise materials and resources that have been designed in a low literacy format with imagery, delivered by *Eat It To Beat It* program staff.
- Fruit & Veg Made Easy – Healthy Lunch Box session: a modified interactive version of the 25 minute Healthy Lunch Box session, with addition of visual aids and hands on activities and an extended timeframe for parents to discuss the content, delivered by *Eat It To Beat It* program staff.
- Arabic Healthy Lunch Box session: a modified version of the 25 minute Healthy Lunch Box session, including increased use of visual prompts to reduce language and literacy barriers; Arabic resources; increased session interactivity; and training of bilingual community members to facilitate Healthy Lunch Box sessions. The Arabic Healthy Lunch Box sessions are delivered by four Arabic speaking Program Facilitators.
- Aboriginal strategy: the Hunter Central Coast region *Eat It To Beat It* Project Officer led scoping activity, reviewing existing culturally appropriate healthy eating resources that could be utilised for an Aboriginal strategy and established relationships with the Awabakal group in their region. They have also conducted a consultation process with Aboriginal groups in other NSW region about developing targeted nutrition promotion activities for their local communities.

Evaluating the *Eat It To Beat It* program

The evaluation of the *Eat It To Beat It* pilot found that parents who attended the Fruit & Veg Sense workshops ate more fruit and vegetables as a result, increasing their intake by more than half a serve per day compared to those who did not attend the sessions during the study period.⁶⁶ This increase broke down to a 0.24 (18 grams) increase in fruit servings and a 0.28 (42 grams) increase in vegetable servings.⁶⁶

In 2013, the NSW Ministry of Health, through the Office of Preventive Health, funded further evaluation of the *Eat It To Beat It* program to assess the Healthy Lunch Box session in improving parents' knowledge, self-efficacy and intentions regarding fruit and vegetable intake; evaluate the funded partnership between Cancer Council NSW and the Western Sydney and Nepean Blue Mountains Local Health Districts formed to deliver the *Eat It To Beat It* program in the Greater Western Sydney region, and investigate the appropriateness of the Healthy Lunch Box strategy for Arabic speaking communities.

The Prevention Research Collaboration at the University of Sydney was commissioned to conduct the Healthy Lunch Box evaluation and the partnership evaluation. The Healthy Lunch Box before and after study found significant increases in parents' knowledge of both serving sizes and recommended intakes regarding fruit and vegetables directly after the intervention, which were sustained to six months after post-intervention.⁶⁷ About 47% of parents/carers had knowledge of serving sizes of fruit before the session and this increased to 73% one week after the session and was still improved at 68% after six months.⁶⁷ Knowledge of adult daily recommended intakes of two serves of fruit increased from 49% to 76% and then decreased to 68% after six months.⁶⁷ Parents' and carers' understanding of serving sizes of vegetables increased from 37% before the session to 52% one week afterward, and by six months was 53%.⁶⁷ Only 33% of parents/carers had correct knowledge about the adult daily recommended intakes of five serves of vegetables before the session and this increased significantly to 73% one week after the session, and by six months this had decreased to 63%, which was still significantly higher than the baseline level.⁶⁷ This independent evaluation concluded that the Healthy Lunch Box sessions were very effective and recommended that the program be scaled up state-wide, and extended to other target groups.

The partnership evaluation demonstrated that the partnerships between Cancer Council NSW and the Western Sydney and Nepean Blue Mountains Local Health Districts were highly successful.⁶⁸ All partners have agreed that:

- Roles and responsibilities were well-defined early in the partnership;
- There was a clear need for the partnerships and mutual benefits for all partners;
- There was effective communication and consultation between partners; and
- The program staff, particularly the Greater Western Sydney *Eat It To Beat It* Project Officer, was integral to the success of the partnership achieving and exceeding agreed objectives.⁶⁸

Given the clearly-demonstrated effectiveness of the *Eat It To Beat It* program and the benefits in establishing funded partnerships with Local Health Districts to increase the reach and effectiveness of a program that assists both organisations in achieving their objectives of increasing fruit and vegetable consumption, Cancer Council NSW would welcome the opportunity to discuss further collaboration with the NSW Ministry of Health and Local Health Districts to increase fruit and vegetable consumption in the community.

Recommendation 9: The Ministry of Health should explore further partnerships with Cancer Council NSW to expand delivery the *Eat It To Beat It* program across NSW in order to increase fruit and vegetable consumption, which can help to deliver weight management benefits.

Conclusion

It is imperative that a comprehensive and multifaceted approach is taken to reduce childhood overweight and obesity levels in NSW. This includes working across the areas of the food environment, the food system and behaviour change. By working with Cancer Council NSW and other stakeholders to implement the recommendations from this submission, the NSW Government can progress in its goal of reducing the rates of childhood obesity in NSW by 5% over 10 years.

Cancer Council NSW appreciates the opportunity to contribute to the Parliament of NSW Inquiry into Childhood Overweight and Obesity. We would be happy to provide further information on the issues raised in this submission. Please contact Clare Hughes, Nutrition Program Manager on (02) 9334 1462 or at clareh@nswcc.org.au.

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