

Australian Dietary Guidelines Scoping Survey

March 2021

Dietitians Australia is the national association of the dietetic profession with over 7500 members, and branches in each state and territory. Dietitians Australia is the leading voice in nutrition and dietetics and advocates for food and nutrition for healthier people and healthier communities. Dietitians Australia appreciates the opportunity to provide feedback to the National Health and Medical Research Council regarding the Australian Dietary Guidelines Scoping Survey.


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Dietitians Australia interest in this consultation

As the leading organisation of nutrition and dietetic professionals in Australia, Dietitians Australia supports the review of the Australian Dietary Guidelines.

The Accredited Practising Dietitian (APD) program provides an assurance of safety and quality and is the foundation of self-regulation of the dietetic profession in Australia. Accredited Practising Dietitians have an important role to play in development, implementation and evaluation of the Australian Dietary Guidelines

This submission was prepared by Dietitians staff following the [Conflict of Interest Management Policy](#) and process approved by the Board of Dietitians Australia.

Discussion

List up to 4 topics from the existing Guidelines which you believe should be updated in the review.

Topic 1: Terminology and definition of ‘unhealthy’/‘discretionary’ foods.

Noting the evidence outlined in the NHMRC-commissioned report by Professor Amanda Lee and colleagues,¹ Dietitians Australia supports review of terminology and definitions of ‘unhealthy’ or ‘discretionary’ foods.

It is important that the terminology used in the reviewed Guidelines is meaningful to the general public, and acknowledges the place of different foods in a healthy balanced diet. Details about tests on consumer understanding should be released, as is done by FSANZ (eg warning labels for pregnant people on alcohol²).

When deciding definitions, evidence on what constitutes an ‘unhealthy’ food must consider the degree of processing of a food and nutrient composition. Clear plain English definitions of terminology (eg ‘unhealthy’) must be included in the reviewed Guidelines in so that the general public, policy makers, health professionals and researchers have a consistent understanding. Cut-offs for the definitions (eg unhealthy: >15g/100g total sugar) should be clearly stated. Evidence behind the definitions and cut-offs should be publicly available to support researchers in producing evidence that can be readily compared with others’ work.

Topic 2: Review of ambiguous categories

Most food groups include a food that does not match the core nutrients or cultural consumption patterns characterising the food group. Examples of this include:

- Fruit – inclusion of fruit juice and dried fruit
- Grains – inclusion of refined grains such as white bread and breakfast cereals
- Meat – inclusion of red meats, poor messaging around exclusion of processed meats
- Dairy – exclusion of full-fat options against evidence

Many of these foods are included in the core food groups as ‘sometimes’ substitutes for healthier options, but this not well understood by the general public. Further, these foods are often misclassified in research due to ambiguity.¹

The inclusion or exclusion of these foods in the core food groups should be reviewed, as should the naming of the core food groups (eg *whole*grains) to best communicate nutrition messages to the general public.

Topic 3: Guidance on sugars

Current guideline 3 references added sugars as being a feature of discretionary foods, but does not define added sugars or make any reference to free sugars. The review should consider updated guidance from the World Health Organisation³ and the evidence informing added sugar labelling reform.⁴

Topic 4: Information about alcohol and nutrition

Alcohol is included in guideline 3 of the current Australian Dietary Guidelines, alongside foods high in sugar, saturated fat or salt. Alcohol consumption can contribute greatly to a person's energy (caloric) intake and displace nutritious foods and beverages. For this reason, the prominence of alcohol guidelines in the Australian Dietary Guidelines should be reviewed. Review should consider the updated NHMRC guidelines to reduce health risks from drinking.

List up to 4 topics, not already included in the Guidelines, which you believe should be considered for inclusion in the review.

Topic 1: Dietary guidelines specific to older adults.

The current Australian Dietary Guidelines do not account for the unique needs of older adults, instead providing guidelines for the generally well adult population. On a physiological level, older adults need more protein to maintain protective muscle mass, calcium to maintain bone strength and adequate energy (calories/kilojoules) to prevent unintentional weight loss when a person has a reduced appetite. On a social level, loneliness and lack of the social aspects of eating can reduce the amount of food an older adult eats, leading to poor health.^{5,6} Older adults who follow the Australian Dietary Guidelines are at risk of becoming malnourished and impacting their quality of life.

Reviewing the evidence and producing distinct dietary guidelines for older adults would provide aged care facilities, hospitals, respite centres, rehabilitation facilities, carers and other members of the information they need to help older Australians to age well and maintain their quality of life.

Topic 2: Sustainability of food choices, and impact of climate change on national food security.

The current Dietary Guidelines do not address impacts of the food system on planetary health, and the effect of climate on food supply and security. To promote human and planetary health, the population needs to adopt healthy and sustainable diets, alongside complete food system transformation that supports and enables these practices.⁷

Climate and ecological sustainability must be considered in the reviewed Guidelines. NHMRC should consider conduct a comprehensive literature search on this topic. The Dietitians Australia Healthy and environmentally sustainable diets briefing paper⁷ reference list may serve as a starting point for the expert reference committee.

Topic 3: Impact of processing on the healthiness of foods.

Ultra-processed foods are occupying an increasingly large proportion of the food system in Australia. Ultra-processed foods are manufactured from food-derived substances, containing little if any whole food and typically including artificial flavours, colours and other cosmetic additives, created by a series of industrial techniques and processes.⁸ These products are designed to be hyper-palatable, affordable, convenient and are marketed intensively. Ultra-processed foods accounted for 42% of

daily energy intake in Australia in 2011-12⁹, displacing valuable foods and nutrients from the core food groups.

The review of the Guidelines should consider the human and planetary health impacts of ultra-processed foods. The impact of these foods on wholefoods growers and the general public's ideas of healthy foods should also be considered.

Topic 4: Context of eating

The context of eating should be considered in the review of the Guidelines. This include:

- Availability, accessibility and affordability of foods consumed at home or away from home
- How food purchasing decisions are made
- Social aspects of eating, including distractors (eg television)
- Setting healthy habits in early childhood
- Marketing of foods, especially to children

Plain English information about these factors should be included in the Guidelines and associated social marketing campaigns.

What changes would you suggest to the presentation of the Guidelines and the Eat for Health resources to make them easier to understand and/or use?

The following suggestions are non-exhaustive:

- Practical visual guides
 - AGHE mapped onto shopping trolley
 - Images in AGHE to show serving sizes of foods (eg 1 slice of bread, not 2)
- Update diversity of images in AGHE
 - More culturally diverse foods (eg taro, bush foods)
 - Include ready-to-drink alcoholic beverages, also known as pre-mixed alcoholic beverages (eg rum and cola in a can, vodka and soda in a single-portion bottle).
- Resources for different life stages
 - Brochures for carers of infants and toddlers
 - Games for children to encourage healthy eating patterns
- Increased accessibility of written resources
 - Easy read resources
 - Plain English used consistently
 - Translation into languages other than English

References

1. Lee A, Rangan A, Allman-Farinelli M, Chen J, Grech A, McDonald S, et al. A rapid review of evidence: discretionary food and drinks. The Australian Prevention Partnership Centre; 2018.
2. Erickson D, Norrish D. Alcohol warning label survey report Melbourne: Roy Morgan; 2019 Available from: <https://www.foodstandards.gov.au/code/proposals/Documents/SD2%20Roy%20Morgan%20Alcohol%20Labelling%20Survey%20Report%20-%20Approval.pdf>
3. World Health Organization. Sugars intake for adults and children. Geneva: World Health Organization; 2015.
4. Food standards Australia New Zealand. Sugar labelling Canberra: Food Standards Australia New Zealand; 2020 Available from: <https://www.foodstandards.gov.au/consumer/labelling/Pages/Sugar-labelling.aspx>
5. Bernstein M, Munoz N. Position of the Academy of Nutrition and Dietetics: Food and Nutrition for Older Adults: Promoting Health and Wellness. Journal of the Academy of Nutrition and Dietetics. 2012;112(8):1255-77. 10.1016/j.jand.2012.06.015
6. Whitney E, Rolfes SR. Understanding nutrition: Cengage Learning; 2018.
7. Dietitians Australia. Healthy and environmentally sustainable diets briefing paper Canberra: Dietitians Australia; 2020 Available from: <https://dietitiansaustralia.org.au/voice-of-daa/advocacy/position-statements/>
8. Monteiro CA, Cannon G, Levy RB, Moubarac JC, Louzada ML, Rauber F, et al. Ultra-processed foods: what they are and how to identify them. Public Health Nutr. 2019;22(5):936-41. 10.1017/s1368980018003762
9. Machado PP, Steele EM, Levy RB, Sui Z, Rangan A, Woods J, et al. Ultra-processed foods and recommended intake levels of nutrients linked to non-communicable diseases in Australia: evidence from a nationally representative cross-sectional study. BMJ Open. 2019;9(8):e029544. 10.1136/bmjopen-2019-029544