



# Healthy Tasmania – Five Year Strategic Plan

February 2016

The Dietitians Association of Australia (DAA) is the national association of the dietetic profession with over 5800 members, and branches in each state and territory. DAA is a leader in nutrition and advocates for food and nutrition for healthier people and healthier nations. DAA appreciates the opportunity to provide feedback on the Healthy Tasmania Five Year Strategic Plan by the Tasmanian Government Department of Health and Human Services.

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## **DAA interest in this consultation**

As the peak body for the dietetic profession in Australia, DAA is concerned about the nutrition, health and well-being of Tasmanians. Sound planning, including planning for food and nutrition systems, is essential to realising the Tasmanian government's goal of a healthier Tasmania.

The Accredited Practising Dietitian (APD) program is the foundation for self-regulation of the dietetic profession. APDs are credentialed and qualified to provide individual medical nutrition therapy, to lead public health and community nutrition programs and to build the capacity of other workers and professionals to meet the nutritional needs of Tasmanians.

## **General feedback**

DAA has contributed to previous consultations from Tasmania on preventive health and health plans. DAA commends the Tasmanian Government on its intent to achieve a healthier Tasmania. There is much in the Healthy Tasmania document which is commendable, including the elements of obesity and tobacco control. These elements would be strengthened by suggesting targets related to the high prevalence of obesity and unacceptable rates of tobacco use. In addition to this targets should be proposed for breastfeeding, fruit and vegetable consumption, malnutrition in older Tasmanians and decreasing consumption of discretionary foods.

DAA agrees that individual choices, social marketing and information giving are important but there is not enough emphasis on robust programs to address the social determinants of health. Greater account is needed of cross portfolio work in education, transport, employment and health to effect better health outcomes. Also, success will require resourcing, cross party agreement, commitment from all levels of government, and effective interface between public, private and non-government agencies.

## **Specific feedback on consultation questions**

Where do you think the current actions we are taking on prevention and promotion have proven effective in improving the health of Tasmanians?

- The Tasmanian Food Security Strategy developed in 2012 has involved collaboration of the Heart Foundation, Primary Health Tasmania and other agencies. There are indications that this has led to significant action in the area of local food systems in Tasmania. A report on the Strategy is expected to be completed by mid 2016.

- Data monitoring and surveillance are important. Tasmania should work with other states and territories in the development of a nationally consistent methodology to assess individual food security, and healthy food basket surveys.
- Tasmania has maintained good records on breastfeeding in the past and DAA believes this leadership should be supported with the necessary funding.
- To effectively engage key stakeholders and community groups in the commissioning process it will be necessary to be inclusive in engagement. For example, in chronic disease prevention, all allied health providers should have the opportunity to contribute to the development of detailed plans, not a token allied health representative at the table.

How would a shift to anticipatory care models improve outcomes for patients and the delivery of health services?

- Investment in early intervention by allied health practitioners has been shown to be effective in a number of areas, for example in people with pre-diabetes, the onset of Type 2 Diabetes can be delayed or prevented. (see attached submission on pre-diabetes).

What are the enablers and barriers that exist within the current structure of the health system in Tasmania (that are the responsibility of the Tasmanian Government) that will need to be considered in supporting implementation of the new direction for preventive health outlined in this Consultation Draft?

- The most obvious barrier is the lack of capacity in the workforce, particularly following recent cuts to the nutrition workforce in Tasmania. Nutrition is acknowledged in the Healthy Tasmania plan as an important contributor to health status, particularly in relation to chronic disease but more needs to be done to address the nutrition needs of vulnerable groups, older Tasmanians, people with mental illness and people with disability. DAA has outlined in previous submissions that the workforce in Tasmania is proportionately less than that in other jurisdictions. DAA strongly encourages the Tasmanian government to make a greater investment in the dietetic workforce to provide support to individuals making lifestyle choices, to lead community programs, and to increase the capacity of other health workers and professionals.

What are some examples of other evidence based initiatives the Government could consider to effectively target key risk factors and chronic diseases in the community?

- There is considerable misinformation around nutrition in the public space. Providing credible evidence based information to Tasmanians will assist in making Tasmania the healthiest state. This can be achieved in a number of ways, one of which is investing in a critical mass of Accredited Practising Dietitians, the qualified and credentialed nutrition professionals.

## **Attachments**

2015/16 Pre-budget submission