

Development of the National Preventive Health Strategy


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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. DA appreciates the opportunity to provide feedback to the Department of Health regarding the National Preventive Health Strategy.

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DIETITIANS AUSTRALIA INTEREST IN THIS CONSULTATION

As the leading organisation of nutrition and dietetic professionals in Australia, Dietitians Australia (DA) considers preventive health to be fundamental in improving health outcomes for Australians. Helping people make healthier food choices will promote both physical and mental health as well as reduce the risk of chronic disease.

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 are the qualified and credentialed food and nutrition experts with a variety of roles in primary, secondary and tertiary preventive health. APDs guide policy and programs in the population to support improved dietary patterns, support people with established disease to improve their food choices, contribute to food reformulation in industry and lead food services in hospitals and other care settings.

RECOMMENDATIONS

1. Prioritise a National Nutrition Policy that addresses the entire food system, protects our agricultural land and primary industries, is environmentally sustainable, and supports access by all Australians to a healthy, affordable diet.
2. Explicit inclusion of Aboriginal and Torres Strait Islander people, health and culture, and address the systemic health inequity between non-Indigenous and Aboriginal and Torres Strait Islander peoples.
3. Addressing the health impacts of climate change through mitigation and adaptation must be a top priority for Australia to prevent deaths, illnesses and injuries associated with climate change.
4. Commit to an ongoing National Nutrition and Physical Activity Survey to provide accurate information on the food supply and dietary patterns. This is necessary to develop and implement interventions to support dietary patterns and food systems that are both healthy and sustainable.
5. The health system must act to support preventive health outside of facility-based care and recognise that prevention starts in communities, schools and workplaces.
6. Strong governance of preventive health actions, with active involvement of health professional peak bodies and consumer representatives, and careful consideration of corporate financial conflicts of interest.
7. A supportive policy environment must be in place to support preventive health actions.
8. Goals, aims and actions to be framed with the systemic approach as the focus.

DISCUSSION

Are the vision and aims appropriate for the next 10 years? Why or why not?

Vision

The vision of the Strategy is appropriate. It is essential that all life stages are included and determinants of health outside an individual's control are acknowledged and addressed.

Aim 1: Australians have the best start in life

Aim 1 is appropriate as the evidence overwhelmingly supports that health in early years is a strong determinant of health into adulthood. However, the description is not comprehensive and should also include:

- The pre-conception and pregnancy period
- The critical period of the first 1000 days of life¹
- Best possible start to life physically, developmentally, socially and emotionally
- Individual, societal and policy support is needed for women, children and families to ensure early life wellbeing

Aim 2: Australians live as long as possible in good health

Aim 2 is appropriate. As Australia's population ages, aging well must become a focus.

Aim 3: Australians with more needs have greater gains

Aim 3 of the Strategy "Australians with more needs have greater gains" is unclear without reading the further explanation. The further explanation provided indicates the intention of the aim is to reduce the gaps in health experiences by sections of the Australian population, but fails to acknowledge who these Australians are. Australians experiencing disproportionate poor health outcomes must be explicitly addressed in the Strategy, including First Nations Australians, people from refugee or culturally and linguistically diverse backgrounds, people experiencing socioeconomic disadvantage and people with disability.

The description also uses the phrase "burdened unfairly due to personal circumstances" which presents the issue as individual and fails to address the systemic factors of income, race, gender and climate change. Aim 3 must be revised so the systemic factors that contribute to ill health are most prominent, as well as who will be the focus of the aim.

Aim 4: Investment in prevention is increased

Aim 4 is appropriate. This must include research, implementation, evaluation, publicly funded access to services and publicly-funded positions to support access.

Are these the right goals to achieve the vision and aims of the Strategy?

Goal 1: Different sectors, including across governments at all levels, will work together to address complex prevention challenges

Goal 1 is appropriate. Preventive health is not just the business of the Department of Health. Social determinants of health tell us that multi-sectoral action is required.

While the Australian Government has produced excellent evidence-based materials in the Australian Dietary Guidelines and the Australian Guide to Healthy Eating, each level of government has a responsibility to translate this information into action through programs for the community and for individuals. Some investment has occurred in this area, but greater investment is needed at the population, community and individual level to improve health outcomes through nutrition. For example, schools providing students with nutritious meals.

Goal 2: Prevention will be embedded in the health system

Goal 2 is appropriate. The health system must have prevention embedded, and act to support preventive health outside of facility-based care, recognising that prevention starts in communities, schools and workplace.

Goal 3: Environments will support health and healthy living

Goal 3 is appropriate, but the description must be amended to explicitly address the environmental health factor of climate. Climate has a significant impact on health and wellbeing, including through the food system (see Appendix A). Environments to support health and healthy living must include effective action on climate change, and creating a healthy and sustainable food system.

The National Preventive Health Strategy must be aligned with the World Health Organisation (WHO) Global Strategy on health, environment and climate change. The WHO Strategy aims to provide a pathway forward on the way the world and its health community need to respond to environmental health risks and challenges. It aims to ensure safe, enabling and equitable environments for health by transforming our way of living, working, producing, consuming and governing.² The current situation and the challenges ahead call for a transformation in the way we manage our environment with respect to health and wellbeing. Current approaches have laid the foundations, but they have not proven sufficient for sustainably and efficiently reducing environmental risks to health and building health-supportive and enabling environments.²

Addressing the health impacts of climate change through mitigation and adaptation must be a top priority for Australia to prevent deaths, illnesses and injuries associated with climate change, and to reduce the economic damage.

Goal 4: Communities across Australia will be engaged in prevention

Goal 4 is appropriate, but the description should be amended to include that communities will work together and be actively engaged and supported in prevention efforts. This must include prevention activities across government departments and at all levels of government, for example infrastructure changes to enable active transport, and the energy transition to support a healthy climate. The description currently reads as though communities are periphery and passive 'partners'. Instead, it should indicate active consultation and collaboration with communities. It should also highlight that prevention activities will work in a coordinated way, so that duplication is avoided and resources are optimally managed.

Goal 5: Individuals will be enabled to make the best possible decisions about their health

Goal 5 should be revised to reflect that individual decisions can only be made in the context of the environment in which an individual exists. The National Preventive Health Strategy should not put the onus of good population health on individuals, but rather ensuring Australia has systems to make the healthy choice the easiest choice, and remove all circumstances where there is no option to make a healthy choice.

Suggested wording: Within supportive environments, individuals will be enabled to make the best possible decisions about their health.

Goal 6: Prevention efforts will be adapted to emerging issues and new science

Goal 6 is appropriate. Evidence is constantly developing and any changes need to be reflected in practice.

Are these the right actions to mobilise the prevention system?

Information and literacy skills

This action is appropriate, but the heading should be amended to specify *health* information and *health* literacy skills.

The focus of this action needs to be not only on developing health information and health literacy skills of individuals, but also ensuring information available to consumers is accessible. This includes information about nutritional value, allergens and environmental sustainability provided on food packaging, labelling, online grocery stores, product information sheets and in public health campaigns. Presentation of information must include plain English for people with varying levels of English literacy, appropriate size text and other means for people with vision impairment, and imagery to support understanding, such as is used in Easy Read resources (examples on the [NDIS Commission website](#)).

Food literacy is another important feature to be included in this action. Food literacy is defined by Vidgen and Gallegos³ as “the scaffolding that empowers individuals, households, communities or nations to protect diet quality through change and strengthen dietary resilience over time. It is composed of a collection of inter-related knowledge, skills and behaviours required to plan, manage, select, prepare and eat food to meet needs and determine intake.” Food literacy impacts nutrition and therefore health, so should be incorporated into this action.

Health system action

This action is appropriate. Prevention must be embedded in the healthcare system, including in the following ways:

- Preventive and early-intervention health services included in the Medicare schedule
- Appropriately funded rebates to allow equitable access for all Australians
- Referral pathways to allied health services should be established as a norm
- Better integration of physical and mental healthcare

The health system must act to support preventive health outside of facility-based care and recognise that prevention starts in communities, schools and workplaces. For this to work and achieve Goal 1, intergovernmental and cross-sectoral collaboration is essential. For example, collaboration between social services, health and finance departments to ensure families on income supplement payments can afford safe, appropriate and nutritious foods, avoiding food insecurity.

Further, the healthcare system must act to reduce its impact on climate change, which has significant impacts on human health. This action should include adoption of the 10 goal framework by Global Green and Healthy Hospitals.⁴

Partnerships

This action is appropriate. Active consultation with peak bodies such as Dietitians Australia is required. Accredited Practising Dietitians, as the most qualified nutrition professionals, should be on relevant steering committees. While wide consultation may be appropriate, careful consideration must be had for which parties are to be involved in governance. Conflicts of interest in partnerships

must be actively managed and the decisions made about preventive health should derive from the scientific evidence and the interests of public health. There is a need to ensure transparency, rigour and public scrutiny of government food and nutrition policy, regulatory and norm-setting activities to ensure they are adequately protected from undue commercial interest.

Leadership and governance

This action is appropriate. For the National Preventive Health Strategy to realise its vision there must be a conducive and supportive policy environment across government sectors and levels. Without policy to support the actions there may be limited progress.

Governance of the Strategy must include well-resourced monitoring and evaluation, and agility to act when evidence or circumstances change. Funding must be included for:

- A targeted National Nutrition Policy to address the breadth of food and nutrition issues and address key priority areas for action. The last Australian National Nutrition Policy was in 1992, nearly 30 years ago, and a current comprehensive iteration is of critical importance to identify, prioritise, drive and monitor nutrition initiatives.
- Dietitians in community, hospital and other government-funded positions including funding for dedicated positions in mental health, disability and aged care.
- Enhanced access to dietitians in the NDIS to support the health and the functional, social and economic outcomes of people with disability.
- Developing and piloting innovative integrated multidisciplinary team healthcare models that include dietitians and allied health professionals. For example, to extend the work of current programs such as the Specialised Intellectual Disability Health Teams.
- Resourcing of federal agencies, such as Food Standards Australia New Zealand (FSANZ) and the Therapeutic Goods Administration (TGA), to maintain a robust food and drug regulation system. This should include governance and enforcement of regulatory codes, as industry-lead voluntary codes, for example warning labels on alcohol for pregnant people,⁵ have proven ineffective as a preventive health action.

As identified in Goal 1, collaboration between sectors and at all levels of government is essential for the Strategy to achieve its vision. This must include leadership on the broader environmental requirements for health. An overarching policy directive from the federal level on addressing climate change and reorienting the food system toward health and ecological sustainability is critical.^{6,7} This is consistent with international frameworks that Australia is already signatory to, such as the Sustainable Development Goals.⁸ Such changes require a fundamental rethink about the food system, its purpose and operations.

Preparedness

This action is appropriate. Preparedness must include:

- Support of innovative health delivery methods, for example telehealth.
- Health workforce funding, adequate Commonwealth-supported places in tertiary training programs, geographical distribution of the workforce and support of ongoing professional development.
- Addressing the effects of climate on health and wellbeing.
- Addressing the threat of climate change and environmental degradation on the food supply and national food security.

Research and evaluation

This action is appropriate. Research and evaluation are integral for understanding future opportunities, but also to determine whether current actions should be repeated, modified, or ceased. The current pandemic-related decline of the tertiary education sector is a significant threat to the vision that Australia should be recognised as a major global player in the nutrition science discipline.

The Strategy must include funding for research and evaluation of the following:

- The National Nutrition and Physical Activity Survey.
- Evaluation of key public initiatives such as the Australian Dietary Guidelines.
- Research by universities and agencies in nutrition science, health behaviours and food systems that are both healthy and environmentally sustainable, as outlined in the decadal plan for the science of nutrition.⁹

Monitoring and surveillance

This action is appropriate. Monitoring and evaluation are more important than ever so that data informs policy and funding decisions which impact on the quality of life of Australians. The Strategy must include a commitment to an ongoing National Nutrition and Physical Activity Survey. Accurate information on the food supply and dietary patterns is necessary to develop and implement interventions to support dietary patterns and food systems that are both healthy and sustainable.

International Frameworks such as the INFORMAS framework, NOURISHING framework and the Nuffield ladder might inform a National Preventive Health Strategy provided local contexts are considered.

Where should effort be prioritised for the focus areas?

Under 'improving consumption of a healthy diet', the following areas should be prioritised:

- Implementation of a National Nutrition Policy.
- Closing the Gap in nutrition-related health outcomes for Aboriginal and Torres Strait Islander peoples.
- Regular evaluation and review of key initiatives such as the Australian Dietary Guidelines.
- Addressing the impacts of climate on food systems, and re-orienting of the food supply to support health and ecological sustainability.
- Commitment to a well-resourced, ongoing National Nutrition and Physical Activity Survey.
- Government-funded research by universities and agencies to meet the decadal plan for nutrition science,⁹ including research on health behaviours and food systems that are both healthy and environmentally sustainable.
- Building community awareness of the role of food and nutrition in physical, mental, economic and social outcomes for all people.
- Integrating physical and mental healthcare and referral pathways across the system to dietitians/allied health.
- Increased funding for public community dietitian positions
- Addressing dietetic workforce issues including geographical distribution and number of dietitians per 100 000 population.

- Increasing community awareness that Accredited Practising Dietitians are experts in food and nutrition and integral components of the health team.

How do we enhance current prevention action?

To enhance current prevention action, prioritisation of a National Nutrition Policy that addresses the entire food system, protects our agricultural land and primary industries, is environmentally sustainable, and supports access by all Australians to a healthy, affordable diet is key.^{6,7} A new National Nutrition Policy would contribute to preventive health by coordinating government and nongovernment strategies to reduce the burden of diet-related disease. A well-structured policy would link policies for obesity, physical activity, chronic conditions, breastfeeding, and the first 1000 days. Updating the Australian Dietary Guidelines is a key component of this action.

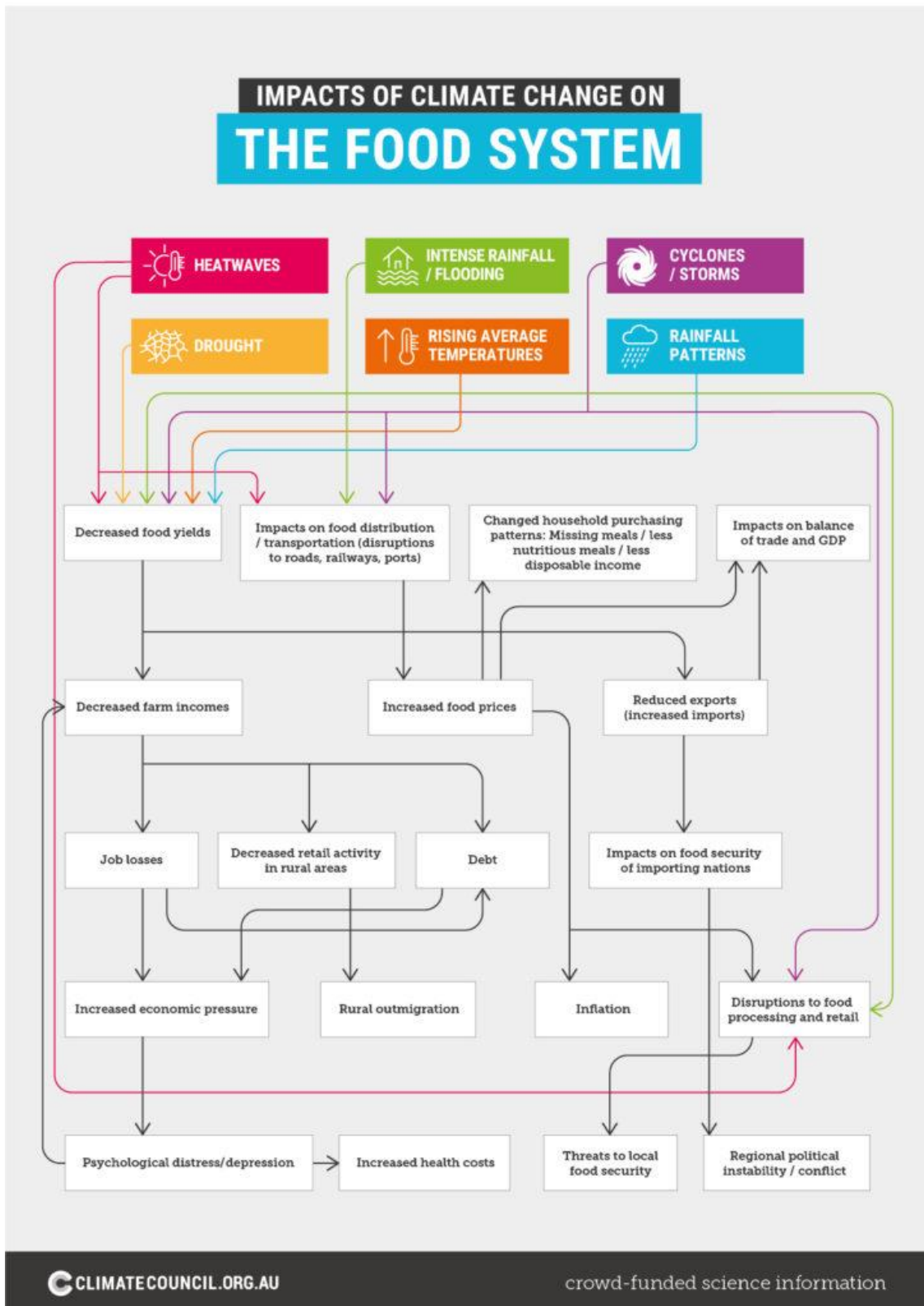
There needs to be involvement and KPIs for all relevant portfolios, for example, in Environment, Mental Health, Transport, Infrastructure, Energy, Social Services, Education, Population, Cities, Agriculture, Regional Development. Embedding an approach to ensure multiple portfolios are involved must be done from the outset.

It would be appropriate to aim for a ten-year program of work with annual evaluation and performance published annually and made publicly available. This should include indicators for short-term, medium-term and long-term measures of progress that use standardised metrics and can help stakeholders demonstrate how they are contributing to the National Preventive Health Strategy. Dedicated funding for evaluation will be needed.

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APPENDIX A – THE IMPACTS OF CLIMATE CHANGE ON THE FOOD SYSTEM



Source: The Climate Council. The impacts of climate change on the food system. 2019. Available from <https://www.climatecouncil.org.au/resources/infographic-impacts-climate-change-food-system/>