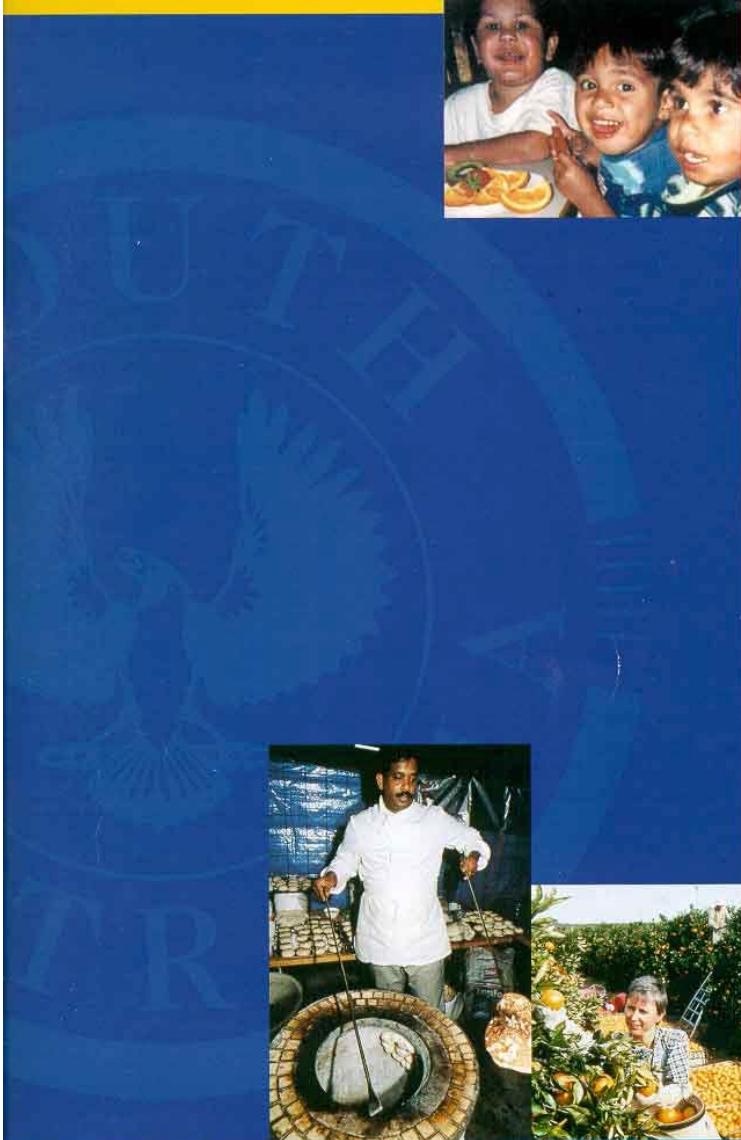




Food & Health

South
Australian
Food
and
Health
Policy
1999



1999



DEPARTMENT OF HUMAN SERVICES



Government
of South Australia

THE SOUTH AUSTRALIAN FOOD AND HEALTH POLICY

Health Promotion SA
Department of Human Services
1999

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Foreword

It is essential that all South Australians are aware of the benefits of eating safe, nutritious and high quality foods. The Food and Health Policy provides the State with the framework to improve food and health into the next century.

In recent time, the links between diet and heart disease and diabetes, have received a great deal of publicity and considerable attention is now being directed to the connection between certain types of cancers and a lack of fibre in diets.

The use of folate supplements is now being promoted to prevent birth defects and women are being urged to supplement their diets with calcium to prevent osteoporosis.

This Policy has been developed following extensive consultation with food producers, researchers, dietitians and educators. It sets out a range of key action areas where action can be taken to produce health gains in relation to food.



HON DEAN BROWN
MINISTER FOR HUMAN SERVICES

October 1998

SOUTH AUSTRALIAN FOOD AND HEALTH POLICY 1999

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Executive Summary

Food is the most fundamental of human needs and is intrinsically linked with people's health and well-being. There are many factors which impact on the broader determinants of health in relation to food and nutrition. For example, poverty, homelessness, social and geographical isolation. The potential for significant change and improvement in the area of food and health is reliant on a range of strategies including education, training and intersectoral collaboration.

Many health problems can be attributed to a range of food related factors, for example poor diet or food contamination. The goal of the *South Australian Food and Health Policy* is to reduce the burden of diet-related illness, disability and early death amongst South Australians.

There is a need for a more focused approach to ensure all South Australians have access to a safe, nutritious, affordable and acceptable food supply. The *South Australian Food and Health Policy* offers a framework for a co-ordinated, intersectoral approach to improve and monitor the food of the South Australian population. In addition, the Policy serves as a guide to direct allocation of human and financial resources to where they are needed most.

After extensive consultation, the following four Key Action Areas were identified and form the basis of the Policy:

◇ **The Food Supply**

◇ **Priority Populations**

- Aboriginal people
- Infants, children, young people and families
- Older people

◇ **Food Safety and Hygiene**

◇ **Knowledge and Skills**

The four Action Areas highlight areas of need where it is perceived that health gains can be achieved by taking action now. Work already done on issues within the Action Areas by a variety of stakeholders is acknowledged and the Policy builds on their successes.

The development of a Policy implementation plan and oversighting committee in the next phase will serve to guide and monitor future improvements to food and health in South Australia.

Additionally the Department of Human Services will provide many opportunities for cross portfolio synergy in the area of food and health. Given the complex nature of food and health issues, successful implementation will involve a range of key players collaborating both within the Department of Human Services and across sectors.

The South Australian Food and Health Policy will take this State forward into the next century in its goal for better food-related health outcomes for all South Australians.

1.0 Background

1.1 The Importance of a Policy for South Australia

The food which people eat plays a vital role in maintaining health and well being from pre-conception to old age. All South Australians should have access to adequate amounts of food which is safe, nutritious, affordable and culturally acceptable ⁽¹⁾.

Given the complexities of factors influencing food and health, improving the diet-related health of South Australians must be a co-operative, collaborative effort involving all the major stakeholders from a range of sectors.

Following on from the establishment of the *National Food and Nutrition Policy*, the development of the *South Australian Food and Health Policy* is a major initiative which provides a framework and strategic direction for future action in this State.

Taking a population health approach, this document outlines the major food and health issues for South Australia in 1998 and beyond.

1.2 The Development of the Policy

Development of the South Australian Food and Health Policy began in 1995 as an initiative of the South Australian Health Commission. In 1997 the South Australian Health Commission was absorbed into the Department of Human Services.

The development process has involved extensive consultations with a range of health service providers, consumers, key agencies, industries and sectors other than health.

A Discussion Paper *Towards a South Australian Food and Health Policy* was released in April 1995 and 400 copies were circulated for comment.

The release of the *Draft Food and Health Policy* in January 1996 was supported by a more focused consultation.

Workshops were conducted in metropolitan and regional areas. The levels of participation and comment were high.

The consultation process has resulted in the identification of Key Action Areas for the State. Formulation of an action plan for policy implementation across the portfolio areas of the Department of Human Services and other key players is anticipated.

During the initial stages, the Policy process has been supported and guided by the South Australian Health Commission Food and Health Policy Advisory Committee.

2.0 Policy Statement

2.1 Policy Vision

The goal of the *South Australian Food and Health Policy* is to **promote the health of South Australians and reduce the preventable burden of food related illness, disability and early death.**

This policy:

- ▷ identifies principles and action areas for endorsement by all levels of government and other relevant sectors, in relation to the food and health of the South Australian population
- ▷ recognises that those who are disadvantaged may require specific additional approaches
- ▷ provides a framework for a co-ordinated, intersectoral approach to improve and monitor the food supply, quality, safety and health of the South Australian population
- ▷ will assist the many stakeholders to recognise the different but complementary roles they play in achieving a safe, nutritious, affordable, acceptable and appropriate food supply
- ▷ acknowledges the important contribution of food to conviviality, health and well-being.

2.2 Policy Context

The development of the *South Australian Food and Health Policy* is set in the context of, and is complementary to, a number of key national and international health and nutrition policy documents:

- ▷ *The Australian Dietary Guidelines for Children and Adolescents (1995)*
- ▷ *Better Health Outcomes for Australians National Outcomes into the Next Century (1994)*
- ▷ *The National Health Policy (1994)*
- ▷ *Health for all by the Year 2000, World Health Organisation (1993)*
- ▷ *The National Food and Nutrition Policy (1992)*
- ▷ *The Dietary Guidelines for Australian (1992)*
- ▷ *The Ottawa Charter for Health Promotion, World Health Organisation (1986)*
- ▷ *The Alma Ata Declaration, World Health Organisation (1978)*

At State level, the *South Australian Food and Health Policy* is set in the following context:

- ▷ *Better Health Outcomes: Goals, Targets and Strategies for the health of South Australians Development Document SA Health Commission (1995)*
- ▷ *Health of Older People in South Australia-Policy and Strategic Directions, SA Health Commission (1995)*
- ▷ *Strategic Directions for Child Health in South Australia, SA Health Commission (1993)*
- ▷ *Primary Health Care Policy, SA Health Commission (1989)*
- ▷ *Social Health Strategy, SA Health Commission (1988)*
- ▷ *South Australian Food Act (1985).*

2.3 Policy Principles

In the context of this Policy, health is understood to mean

"a complete state of physical, mental and social well-being and not merely the absence of disease or infirmity"

as defined by the World Health Organisation.

In terms of food and health, there are many factors that impact on people's consumption patterns and nutritional status. These may include environmental, social, cultural, economic, financial factors and exercise habits.

The following principles underpin the philosophical framework of this Policy:

Co-operative and Co-ordinated Action

Achieving the goals of the *South Australian Food and Health Policy* will require a co-ordinated and co-operative effort between the various sectors involved in the food, nutrition and human services arena and the community.

According to Sindall (1995)⁽²⁾

"No single group or organisation can bring about dietary change to the degree needed to significantly improve public health. The best outcomes are achieved when government, non-government and food industry sectors work together"

Research and Evaluation

Continued advances in nutritional science and research are vital to our knowledge and understanding of health and diet-related diseases. Translating theory and current knowledge into practice will provide better outcomes for the population in all aspects of food and health.

Multiple Strategies and Approaches

These are needed to develop long term comprehensive, sustainable solutions that take into account social, cultural and economic differences in the population.

Equity and Access

Health promotion focuses on achieving equity in health. It aims to reduce differences in current health status and ensure equal opportunities and resources to enable all people to achieve their fullest health potential.

All South Australians need access to a safe, affordable, nutritious food supply. It is particularly important for remote and isolated communities.

Workforce Capacity

There are many individuals providing food, diet and health information in a variety of settings – all with varying levels of training.

It is vital that workers with appropriate levels of skills and expertise are recruited for positions in the food and human services arena.

Adequate staffing and service levels are needed for human service units to continue to maintain service delivery and implement programs.

Training for professionals and undergraduates which builds on existing knowledge in a range of allied health fields needs to be supported.

Food for Optimal Health and Enjoyment

Implicit in this document is an understanding of the positive aspects of food. As well as nutrients food provides us with a range of tastes and experiences. It plays a significant part in celebrations and cultural and religious events.

Consumption of specific diets can provide control of disease symptoms, improve quality of life and provide a sense of well being. Examples of diseases where diet plays a significant role include cardiovascular disease, diabetes, HIV/AIDS and osteoporosis.

Information Quality

Given the range of sources of nutrition information it is imperative to work towards the availability of accurate diet, nutrition and food product information, based on current scientific understanding.

This Policy supports the provision of accurate information being publicly accessible.

2.4 Key Action Areas

From the Policy consultation phase, the following Key Action Areas have emerged for South Australia for the next five years.

- ▷ The Food Supply
- ▷ Priority Populations
- ▷ Food Safety and Hygiene
- ▷ Knowledge and Skills

There were a large range of issues raised during the consultation phase and the Action Areas highlight perceived greatest need.

Each of the Action Areas includes a range of possible strategies. These strategies are not intended to be a comprehensive list but rather are examples suggested for the implementation of this Policy. Their prioritisation and the development of further strategies will occur in the Policy Implementation Plan which will be developed.

2.5 Implementation and Evaluation

The Department of Human Services will be responsible for co-ordinating the implementation of the policy in co-operation with other government departments, non government agencies and industry.

Successful implementation will involve effort and commitment from stakeholders in a range of sectors other than the human services. These may include agriculture, local government, food processing and retailing.

In order to achieve this the Department of Human Services will facilitate the establishment of appropriate structures to oversee the implementation and monitoring of the Policy.

A five year implementation plan with performance indicators will be developed in conjunction with key players to ensure policy implementation. Both qualitative and quantitative methods of evaluation will be necessary to assess the range of proposed strategies.

Recently at National and State levels specific initiatives such as *Active Australia*, and *Acting on Australia's Weight – A Strategy for the Prevention of Overweight and Obesity* have been developed. These initiatives will be addressed through implementation plans and are complementary to elements of this Policy.

The South Australian Food and Health Policy and its subsequent implementation plan will be congruent with the aim of Commonwealth structures such as the Strategic Intergovernmental Nutrition Alliance (SIGNAL) which focuses on furthering public health nutrition policy implementation in Australia.

It is anticipated that a multi-sectoral committee will oversee the policy implementation phase. This will assist in the development of complementary ways of assessing progress across sectors, whilst recognising the goals of different sectors.

The Department of Human Services will develop an evaluation and review process for the implementation of this Policy. The Policy will be reviewed after a period of three years in the year 2002.

3.0 Action Areas For South Australia

3.1 Action Area One - The Food Supply

A high quality food supply is dependent on ecologically sustainable agricultural practices and product handling. The quality and variety of food produced has an impact on the health of the population.

South Australia produces a large range of quality, locally produced food for consumers. In general the food available is affordable and satisfies a range of dietary needs.

The Department of Human Services, in conjunction with other government departments, has a role to support and maintain the nutritional quality and safety of food produced. Mechanisms within the health system which can influence control over the food supply need to be explored and expanded.

Sensitive and sensible use of environmental resources for agricultural purposes is vital to sustain the ecological integrity of the environment, maintain food production levels and the health of the population.

GOAL

TO IMPLEMENT QUALITY MANAGEMENT PRACTICES AND CONTINUOUS IMPROVEMENT CONSISTENT WITH NATIONAL AND INTERNATIONAL BEST PRACTICE STANDARDS AT ALL STAGES OF FOOD PRODUCTION AND SUPPLY IN SOUTH AUSTRALIA.

Objective 1

The Department of Human Services will continue to instigate and support food monitoring programs to ensure the nutritional quality and safety of the food supplied to the South Australian population.

(Also see Action Area Three - Food Safety and Hygiene page 16)

Strategies

- 1.1 Maintain the Department of Human Services participation in, and on-going commitment to a range of food monitoring initiatives such as the Australian Total Diet Survey
- 1.2 Encourage and support local government to play a greater role in food monitoring, sampling and other relevant programs at the local level.

Objective 2

The Department of Human Services will investigate mechanisms to influence and improve the food supply within the health system and throughout other settings as appropriate.

Strategies

- 2.1 Work with relevant hospital food services in order to develop and implement food service and nutrition benchmarks for hospital food services
- 2.2 Explore the use of service and funding agreements to influence the nature of food supplied within health units
- 2.3 Work with relevant agencies to support the development of policies and guidelines which will ensure the availability of good quality nutritious food in a range of settings, such as schools, childcare centres, public venues and prisons.

Objective 3

The Department of Human Services will forge intersectoral links with all relevant stakeholders including government, the private sector and the community to facilitate access to a quality food supply for all South Australians, particularly those in rural or remote areas.

Strategies

3.1 Support communication mechanisms between all major players involved in the production, processing, distribution and consumption of food to achieve and maintain nutritional quality throughout the food chain:

This involves:

- improving understanding of the roles of all players in the food production chain and
- identifying opportunities for collaborative action to improve access to quality food

3.2 Facilitate appropriate representation of the Department of Human Services and other key stakeholders on intersectoral committees addressing food supply issues

3.3 Support information forums which encourage discussions amongst key stakeholders, including communities, about issues of food quality and production

3.4 Support health agencies to work with key players and communities to develop local programs to improve access to food for rural and remote communities.

Objective 4

The Department of Human Services will support other relevant government departments in their efforts to promote environmentally sustainable, economically viable and diverse food production, processing and marketing practices that protect and maintain soil and water quality, and encourage integrated natural resource management, waste minimisation and recycling.

Strategies

4.1 Support, in conjunction with other relevant stakeholders, measures that improve the quality and potability of South Australian water, including that in remote areas

4.2 Support, in conjunction with other relevant stakeholders, farming practices that reflect good land management practices including soil conservation, a reduced reliance on pesticides and maintain produce variety

4.3 Support, in conjunction with other relevant stakeholders, the provision of consistent, current information on issues affecting the environment and the food supply

4.4 Support, in conjunction with other relevant stakeholders, measures that minimise unnecessary food packaging, and promote recycling and waste minimisation.

3.2 Action Area Two - Priority Populations

A. ABORIGINAL SOUTH AUSTRALIANS

Census data from 1996 revealed 18,942 Aboriginal people (9,256 men and 9,686 women) living in South Australia.

Due to a number of historical, political, social and economic factors, Aboriginal people experience a greater degree of ill health and higher rates of hospital admissions than all other Australians.

For many Aboriginal people cultural and spiritual factors may influence food and nutrition practice.

The nature of food and nutrition issues for Aboriginal people and related strategies will differ between rural and urban communities. This variance is a direct result of where people reside. Rural Aboriginal people experience food and nutrition issues related to the lack of affordable, accessible and nutritious food. In contrast, urban Aboriginal people have food and nutrition issues which can be attributed to the lack of culturally appropriate nutrition information and promotion.

There are limited resources and a lack of cultural expertise in dealing with food, nutrition and health issues for Aboriginal people.

For best results, Aboriginal communities need to be consulted, involved and trained to develop and deliver strategies. This often requires projects to be funded and undertaken over a longer time frame.

GOAL

- **TO REDUCE THE INCIDENCE OF FOOD-RELATED DISEASES EXPERIENCED BY ABORIGINAL PEOPLE IN URBAN, RURAL AND REMOTE AREAS**
- **TO IMPROVE NUTRITION KNOWLEDGE, SKILLS AND PRACTICES AMONGST ABORIGINAL SOUTH AUSTRALIANS**

Objective 1A

In conjunction with Aboriginal communities and relevant stakeholders, the Department of Human Services, will facilitate initiatives to improve Aboriginal peoples' access to quality food and to quality nutrition information and skills.

Strategies

- 1.1 Cross border liaison with Aboriginal communities, health agencies and other key players who have similar jurisdictions, to improve access to good quality nutritious food for rural and remote communities

(Also see Action Area One – The Food Supply. page 5)

- 1.2 Support the development and implementation of culturally appropriate model programs in food and nutrition which support practical food skills and which are transferable to other South Australian Aboriginal communities

(Also see Action Area Four – Knowledge and Skills. page 18)

- 1.3 Support, in conjunction with Aboriginal communities, the development of culturally appropriate nutrition education materials to promote awareness of food and nutrition

- 1.4 Work with relevant key agencies to facilitate access to programs which enhance food knowledge and practical skills (including shopping and budgeting) for Aboriginal children and young people

(Also see Action Area Two – Priority Populations B - Infants, Children, Young People and Their Families page 10)

- 1.5 Support initiatives aimed at improving feeding practices amongst Aboriginal infants and young children

(Also see Action Area Two – Priority Populations B - Infants, Children, Young People and Their Families page 10)

- 1.6 Investigate innovative strategies to address the high cost of food for remote Aboriginal communities

- 1.7 Support, where appropriate, programs encouraging the use of bush and traditional foods
- 1.8 Work with relevant Aboriginal communities and community store owners to:
- ensure a range of fresh and affordable food is available
 - support store managers in the knowledge and skills required to run the business successfully
 - provide consumers with adequate knowledge and skills in order to make informed food choices from the community stores.

Objective 2A

The Department of Human Services will support and promote breastfeeding and appropriate infant feeding practices amongst the Aboriginal community.

(Also see Action Area Two – Priority Populations B – Infants, Children, Young People and Their Families. page 10)

Strategies

- 2.1 Support the development of culturally appropriate resources on breastfeeding, antenatal and postnatal issues
- 2.2 Support the development of more effective models of service delivery around issues of infant feeding practices by building links with other agencies as appropriate.

Objective 3A

The Department of Human Services will endeavour to minimise the risks of food-borne disease amongst Aboriginal people particularly in rural and remote communities.

(Also see Action Area Three – Food Safety and Hygiene page 16 and Action Area Four – Knowledge and Skills page 18)

Strategies

- 3.1 Increase communities' knowledge of appropriate food storage facilities and encourage safe food handling practices, particularly in rural and remote areas.

Objective 4A

The Department of Human Services will support the development of a network of trained Aboriginal Human Service Workers with expertise in nutrition.

(Also see Action Area Four - Knowledge and Skills page 18)

Strategies

- 4.1 In conjunction with Aboriginal Health Workers and relevant training organisations, build on the existing nutrition curriculum in the Aboriginal Health Worker Training course
- 4.2 Support the provision of on-going funding to train, employ and support full time Aboriginal Health Workers with experience in food and nutrition in Aboriginal Health Units and other relevant agencies
- 4.3 Support Aboriginal Health Units to promote appropriately trained Aboriginal Health Workers as credible sources of nutrition information to local communities.

Objective 5A

The Department of Human Services will work to improve the awareness of non Aboriginal Health Workers of Aboriginal cultural issues around food, nutrition and health.

(Also see Action Area Four - Knowledge and Skills page 18)

Strategies

- 5.1 Support the development and implementation of education programs and other initiatives to raise the cultural awareness of non Aboriginal Health Workers in addressing Aboriginal food and nutrition issues.



3.2 Action Area Two - Priority Populations

B. INFANTS, CHILDREN, YOUNG PEOPLE AND THEIR FAMILIES

Food and its impact on health plays a large role in the lives of all young South Australians and their families.

Nutrition before and during pregnancy is important in the development of healthy infants.

Infants, children and young people have specific nutritional needs associated with rapid growth and physical and mental development. Appropriate nutrition in the early years of life is vital to enable an individual to develop to maximum potential.

It is recognised that there are 'at risk' groups that may require specific additional strategies, for example young people living away from home and low income families.

Access to good food and nutrition practices and skills begins with the family and forms the basis of lifelong dietary behaviour. The establishment of such habits will reduce the incidence of diet related disease later in life.

GOAL

TO FACILITATE IMPROVEMENTS IN THE NUTRITION AND FOOD RELATED HEALTH OF INFANTS, YOUNG PEOPLE AND THEIR FAMILIES IN SOUTH AUSTRALIA

Objective 1B

The Department of Human Services will support initiatives aimed at improving the nutritional intake of women before and during pregnancy.

Strategies

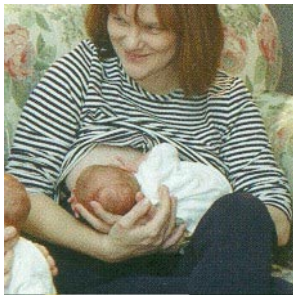
- 1.1 Support initiatives that raise awareness of and promote *The Dietary Guidelines for Australians*, including the importance of a healthy diet and a positive body image for women
- 1.2 Support initiatives that raise awareness and promote adequate folate intake for women through diet or appropriate folic acid supplementation, for at least one month prior to and during the first three months of pregnancy, in order to reduce the risk of neural tube defects in babies
- 1.3 Support initiatives that facilitate access by pregnant women to sound nutrition education and information from health professionals during pregnancy
- 1.4 Support initiatives that facilitate access to nutrition education for groups with special needs during pregnancy, for example teenagers, vegetarians, Aboriginal women
- 1.5 Encourage the implementation of safe, hygienic food preparation at home and within all sectors of the food industry, minimising the risk of specific infections for pregnant women, such as Listeriosis.
(Also see Action Area Three - Food Safety and Hygiene page 17)

Objective 2B

The Department of Human Services will endeavour to increase the proportion of babies aged six months who are fully or partially breastfed by 10% by 30 June 2000.

Strategies

- 2.1 Support initiatives to improve access to breast feeding education, supportive hospital environments and ante and post natal support services for new parents
- 2.2 Facilitate access by health professionals and allied health professionals to current breast feeding information and training
- 2.3 Establish lactation consultant positions in hospitals and ensure the provision of consistent advice on breast feeding
- 2.4 Support efforts to improve community attitudes to breastfeeding in public
- 2.5 Continue to implement and monitor compliance with the WHO *Code of Practice on Breastfeeding and Marketing of Infant Formulas*
- 2.6 Support the UNICEF baby friendly hospital initiative on breastfeeding.



Objective 3B

The Department of Human Services will encourage and support appropriate feeding practices for all South Australian infants and young children.

Strategies

- 3.1 Facilitate the development of education programs and resource materials that address specific infant feeding issues, for example the age of introduction of solids, iron and the use of appropriate milks
- 3.2 Support statewide education programs to reduce the incidence of nursing caries
- 3.3 Encourage the adoption by childcare centres and pre-schools of the South Australian Health Commission's *Nutrition Guidelines for Childcare Centres – Making Childhood a Healthy Experience* (distributed by the Department of Human Services).

Objective 4B

The Department of Human Services will encourage education agencies to provide children and young people with knowledge, skills and supportive environments in relation to food, nutrition and health.

Strategies

- 4.1 Liaise with relevant authorities to build on existing food and nutrition learning areas in the South Australian Health and Physical Education Curricula, including the maintenance of practical food skills such as budgeting
- 4.2 Support where appropriate, mechanisms which implement the National Nutrition Education in Schools Project and curriculum

- 4.3 Encourage school canteens, managers and canteen committees to provide foods for sale which comply with the *Australian Dietary Guidelines for Children and Adolescents* and which are consistent with classroom nutrition education
- 4.4 Ensure school canteens have access to nutrition support services and resources, for example the South Australian School Canteen Association
- 4.5 Support, in conjunction with relevant education authorities, the provision of appropriate foods for children and adolescents during extra curricula activities, for example camps, excursions, after school care
- 4.6 Encourage appropriate teacher training to ensure the provision of sound nutritional information and advice by school teachers, sporting and recreational coaches.
- 5.3 Support the provision of programs by health units which improve parents' and young peoples' skills in food budgeting, shopping, storage and preparation
- 5.4 Support networking activities between health units and other agencies to reduce the duplication of nutrition programs and services
- 5.5 Support nutrition information forums and training updates for human service workers and relevant others for example, teachers and community store managers
- 5.6 Support the implementation of the National Health and Medical Research Council document, *Acting on Australia's Weight – A Strategic Plan for the Prevention of Overweight and Obesity*
- 5.7 Support initiatives aimed at reducing the incidence of eating disorders through encouraging the development of a healthy body image

Objective 5B

The Department of Human Services will support initiatives aimed at providing knowledge, skills and supportive environments in relation to food, nutrition and health that will enable children and young people to achieve maximum potential for growth and development.

Strategies

- 5.1 Support initiatives that raise awareness and facilitate the implementation of the *Australian Dietary Guidelines for Children and Adolescents*
- 5.2 Support initiatives aimed at improving the access of children and young people to regular nutritious meals including breakfast and appropriate snacks, for example, homeless youth and Aboriginal children on remote communities
- 5.8 Create supportive environments by working with key players for example, retailers, producers and Aboriginal Community Councils to influence the range of foods available and to encourage healthier and affordable food choices
- 5.9 Encourage increased availability of nutritious foods to improve the range of healthy food choices for meals eaten outside of the home for example, food at sports venues and take away food outlets
- 5.10 Support and encourage community groups to address factors that have an impact on family food choices for example television advertising, retail marketing.

3.2 Action Area Two - Priority Populations

C. OLDER PEOPLE

In 1996 the older population of South Australia (people aged 65 years and over) was 197,265 people, representing 13.8 % of the State's population. This proportion is expected to rise to 318, 900 older people by June 2021 ⁽³⁾.

Older people are amongst the highest users of the health care system. Improved nutritional and health status in this group will contribute towards a reduction in the high cost of health services.

Populations are not homogeneous. Amongst older people there are differing nutrition and health needs depending on whether or not older individuals are healthy, frail or suffer chronic disease.

The ability of older people to consume an adequate diet may be limited by a range of factors including;

- chronic disease
- inadequate income
- lack of transportation
- isolation
- limited mobility
- dentition
- quality of nutrition information
- limited cooking skills
- limited family support

Eating well in the latter years is important to leading an active life, maintaining mental health, fighting infections and controlling symptoms of diseases such as diabetes.

In 1995 the South Australian Health Commission released *The Health of Older People in South Australia: Policy and Strategic Directions* document which includes the importance of nutrition for maintaining the health of older people.

GOAL

TO IMPROVE THE NUTRITION AND FOOD RELATED HEALTH, AND HENCE QUALITY OF LIFE, OF OLDER SOUTH AUSTRALIANS

Objective 1C

The Department of Human Services, in conjunction with other relevant government departments, will facilitate access to a wide range of nutritious foods by older people.

Strategies

- 1.1 Support, in conjunction with key players, mechanisms which allow older people with limited mobility or transport to purchase food more easily, for example telemarketing, phone orders and home delivery services
- 1.2 Investigate, in conjunction with key players, improvements in local, metropolitan and rural transport networks to assist older consumers to shop for food.

Objective 2C

The Department of Human Services, in conjunction with relevant governments departments and agencies, will work to reduce the likelihood of poor nutrition in 'at risk' older South Australians.

Strategies

- 2.1 Support initiatives that expand the use of the Australian Nutrition Screening Initiative in a range of health care settings
- 2.2 Encourage a comprehensive nutritional assessment for older people on admission to hospitals and residential facilities
- 2.3 Promote and raise awareness amongst key players of the importance of diets of suitable consistency and the provision of modified feeding utensils to older people with disabilities
- 2.4 Ensure that funded meal programs for older people, for example Meals on Wheels, have meal preparation and

- transport facilities that reflect safe food handling practices
- 2.5 Liaise with funded meal programs for older people, for example Meals on Wheels, to expand services to include the provision of meals (frozen or cook-chill) on weekends and public holidays for clients
- 2.6 Investigate options to develop measures which link nutrition standards for residential care facilities to Commonwealth funding
- 2.7 Investigate the need for an elders meal provision program on remote Aboriginal communities.

Objective 3C

The Department of Human Services, in conjunction with local government and relevant government departments, will facilitate the provision of a culturally appropriate, nutritious diet for older people who live in supported residential facilities or are recipients of funded meal programs.

Strategies

- 3.1 Support the development and implementation of nutrition training programs (within a culturally appropriate framework) for local government officers and managers and key staff in supported residential facilities and funded meal programs
- 3.2 Encourage the adoption of the South Australian Health Commission's *Nutrition Guidelines for Nursing and Aged Care Homes - Improving the Quality of Life in the Later Years* by supported residential facilities and funded meal programs. These Guidelines are available from the Department of Human Services
- 3.3 Implement and review food service guidelines for residential facilities

- 3.4 Investigate, with key players, options for facilitating the economic provision of culturally appropriate meals
- 3.5 Support increased access and availability of specialist nutrition and dietetic services to supported residential facilities and to caregivers of older people at risk, for example those caring for individuals with dementia.

Objective 4C

The Department of Human Services will support the development of training programs to ensure that health workers have an understanding of the ageing process and the nutritional needs of older people.

(Also see Action Area Four – Knowledge and Skills page 18)

Strategies

- 4.1 Support continued access to professional development for health workers specialising in the area of aged care and related areas
- 4.2 Liaise with relevant education organisations, for example the Department for Employment, Training and Further Education to develop appropriate curriculum and/or facilitate the integration of specialist nutrition topics into existing courses.

Objective 5C

The Department of Human Services, in conjunction with other agencies, will support the development and implementation of specific community based nutrition education programs for older people to improve knowledge and skills.

Strategies

- 5.1 Liaise with existing service providers/agencies, to support the development and implementation of a range of nutrition education programs for older people in the community, for example widowed men

- 5.2 Reinforce communication links amongst existing organisations working with older people and establish and support collaborative networks to reduce the duplication of food and nutrition services.

Objective 6C

The Department of Human Services, in conjunction with other government departments, will encourage continued research and dissemination of data on issues pertaining to nutrition and health in older people, in order to determine and implement future effective intervention strategies.

Strategies

- 6.1 Encourage and support scientific research which furthers understanding of the link between food and health and the ageing process

- 6.2 Support and encourage the collection, monitoring and evaluation of data about the dietary behaviour of older people, for example dietary surveys, in order to improve the quality of food and nutrition related health services to older people

- 6.3 Obtain, collate and disseminate on-going, current information about food and nutrition initiatives relating to older people in South Australia.



3.3 Action Area Three - Food Safety and Hygiene

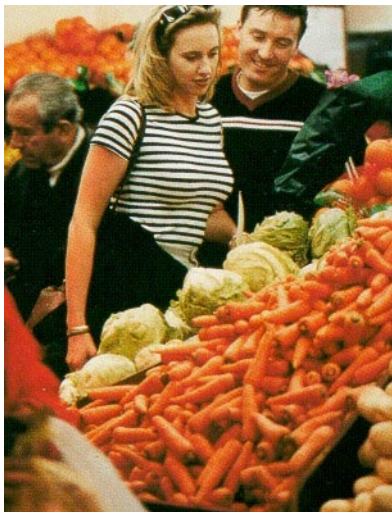
The Public and Environmental Health Service of the Department of Human Services has legislative responsibilities to promote proper standards of public and environmental health in the State. This includes ensuring food hygiene and food quality.

Working within a best practice continuum provides a framework for measurable improvements in performance and efficiency.

Better communication within local government and between the Department of Human Services and local government, will reduce duplication of work and allow more efficient use of resources.

GOAL

TO ACHIEVE BEST PRACTICE RELATING TO FOOD SAFETY AND HYGIENE IN ORDER TO PROTECT PUBLIC HEALTH



Objective 1

The Department of Human Services will aim to increase and improve communication relating to food safety matters within local government and between the Department of Human Services and local government.

(Also see Action Area One – The Food Supply page 5)

Strategies

- 1.1 Ensure continuous improvement in the use of appropriate information technology within the Department of Human Services to disseminate relevant data, technical and policy information
- 1.2 Encourage local government to implement computer technology within individual Councils that allows the timely dissemination of information from the Department of Human Services to local government, for example in the case of a food product recall
- 1.3 Encourage local government to implement the required computer technology to access state, national and international databases and technical information
- 1.4 Encourage local government to form regional groups with the view to improving communication with the Department of Human Services and to assist in ensuring the informed delivery of food inspection services.

Objective 2

The Department of Human Services will continue to respond to and participate in national initiatives regarding the development of standardised food regulation, legislation and relevant food codes.

Strategies

- 2.1 Actively participate in the development and review of key national standards and codes at a State level based on the National Safe Food System Model
- 2.2 Implement key national standards and codes at State level through the development of legislative frameworks and administrative systems.

Objective 3

The Department of Human Services will continue to seek the co-operation and participation of the food industry in the development and implementation of State food safety initiatives.

Strategies

- 3.1 Work with industry groups to facilitate the development of industry led quality assurance programs, for example Hazard Assessment Critical Control Point (HACCP)
- 3.2 Support and encourage industry groups to implement education and training of industry based food handlers in line with National standards.

Objective 4

The Department of Human Services will facilitate increased consumer awareness, knowledge and skills relating to food hygiene practices.

Strategies

- 4.1 The Department of Human Services, in conjunction with key players and local level networks, will encourage Environmental Health Officers in local government to provide consumers and food retailers with information on food hygiene matters
- 4.2 Encourage and support Environmental Health Officers in local government to play a key role in providing information and education regarding food safety and hygiene to the public and food retailers
- 4.3 Support initiatives to provide food safety and hygiene educational material that addresses gaps in existing information, meets best practice standards, minimises duplication and is appropriately targeted
- 4.4 Explore, in conjunction with the Department for Employment, Training and Further Education, the possibility of increasing the coverage of safe food and hygiene issues in the Health and Physical Education curriculum.

3.4 Action Area Four - Knowledge and Skills

Improvements in knowledge and skills which allow Australians to choose a healthy diet is an objective in the *National Food and Nutrition Policy (1992)*.

The increasing complexity of the food supply requires access to credible information about food, its preparation, cost and its impact on health.

Food related knowledge is learned via a range of avenues including teachers, mass media, advertising, friends, family and human services professionals.

There is a wide range of health professionals and others involved in providing food and nutrition-related health information and education to the general public. All have differing levels of training and expertise, so the provision of adequate professional development training opportunities is essential.

Differing levels of information are required by consumers depending on their circumstances. Some people may have special dietary requirements for example in the case of newly diagnosed diabetes. Others may have a need for information with which they are not necessarily familiar for example, infant feeding.

Consumers, health professionals and others need to be able to source up-to-date information given the rapidly changing nature of nutrition and food science.

Clearly, advocacy is required for the provision of quality on-going nutrition services and information within the human services system for both workers and consumers.

GOAL

TO IMPROVE AND MAINTAIN THE PROVISION OF CREDIBLE AND CURRENT FOOD AND HEALTH INFORMATION AND TRAINING, VIA MULTI-STRATEGY APPROACHES

Objective 1

The Department of Human Services will work to improve the provision of credible food, nutrition and health information and training programs to a range of health and other professionals.

Strategies

- 1.1 Promote initiatives to increase the recruitment and retention of workers in metropolitan and country areas, specifically skilled in the provision of both food and nutrition training and education in South Australia; such as dietitians, nutritionists and environmental health officers
- 1.2 Promote initiatives which facilitate food and nutrition training of food handling and food service personnel in institutional, community and retail, wholesale sectors
- 1.3 Promote initiatives which facilitate the food and nutrition training of key workers in health and other sectors who are likely to be providers of food and nutrition education, such as nurses, general practitioners, teachers, environmental health officers, fitness instructors and pharmacists
- 1.4 Adopt and promote the position paper of Dietitians Association of Australia on *Nutrition training in medical schools*. Further modification and extension of this into primary and inservice training programs for nurses, teachers and others would be appropriate
- 1.5 Promote initiatives which focus on appropriate food and nutrition training for rural or remote area human service workers (for example, remote area nurses), especially those who are involved with Aboriginal communities (*Also see Action Area Two – Priority Populations A –Aboriginal South Australians page 7*)

- 1.6 Promote initiatives of government and non-government breast-feeding support groups, for example, Nursing Mothers Association (*Also see Action Area Two – Priority Populations B – Infants, Children, Young People and Their Families page 10*)
- 1.7 Encourage training initiatives by agencies whose business it is to further farming practices that are reflective of good land management and food production methods (*Also see Action Area One – The Food Supply page 5*).

Objective 2

The Department of Human Services will, in conjunction with key players, support the development of supportive environments in a range of settings to facilitate increased knowledge and skills.

Strategies

- 2.1 Support in conjunction with key players, the expansion of worksite health promotion programs addressing food and health issues
- 2.2 Investigate mechanisms which involve media, food industry and health authorities to promote sound food and health information to the general public
- 2.3 Develop and implement with key players nutrition and food related performance standards for hospitals and other food services which can be integrated into quality assurance programs as appropriate.

Objective 3

The Department of Human Services will, in conjunction with key players support mechanisms and programs which provide consumers with increased knowledge and skills.

- 3.1 Support at State level, initiatives by the Australia New Zealand Food Authority to simplify and improve food labelling for consumers
- 3.2 Promote, in conjunction with key players, the continued implementation of food and nutrition education programs operating from community health and other community centres
- 3.3 Promote, in conjunction with key players, food and nutrition education programs which operate through point of purchase schemes
- 3.4 Promote in conjunction with key players the development of food and nutrition education in primary and secondary schools (*Also see Action Area Two – Priority Populations B – Infants, Children, Young People and Their Families page 10*)
- 3.5 Encourage through the Department of Human Services grant programs and other funding sources the promotion of research and evaluation programs, that promote food and nutrition education.

4.0 APPENDICES

APPENDIX 1

THE AUSTRALIAN DIETARY GUIDELINES FOR CHILDREN AND ADOLESCENTS

1. Encourage and support breastfeeding
2. Children need appropriate food and physical activity to grow and develop normally. Growth should be checked regularly
3. Enjoy a wide variety of nutritious foods
4. Eat plenty of breads, cereals, vegetables (including legumes) and fruits
5. Low fat diets are not suitable for young children. For older children, a diet low in fat and in particular, low in saturated fat, is appropriate
6. Encourage water as a drink. Alcohol is not recommended for children
7. Eat only a moderate amount of sugars and foods containing added sugars
8. Choose low salt foods.

Guidelines on specific nutrients

1. Eat foods containing calcium
2. Eat foods containing iron.

APPENDIX 2

THE DIETARY GUIDELINES FOR AUSTRALIANS

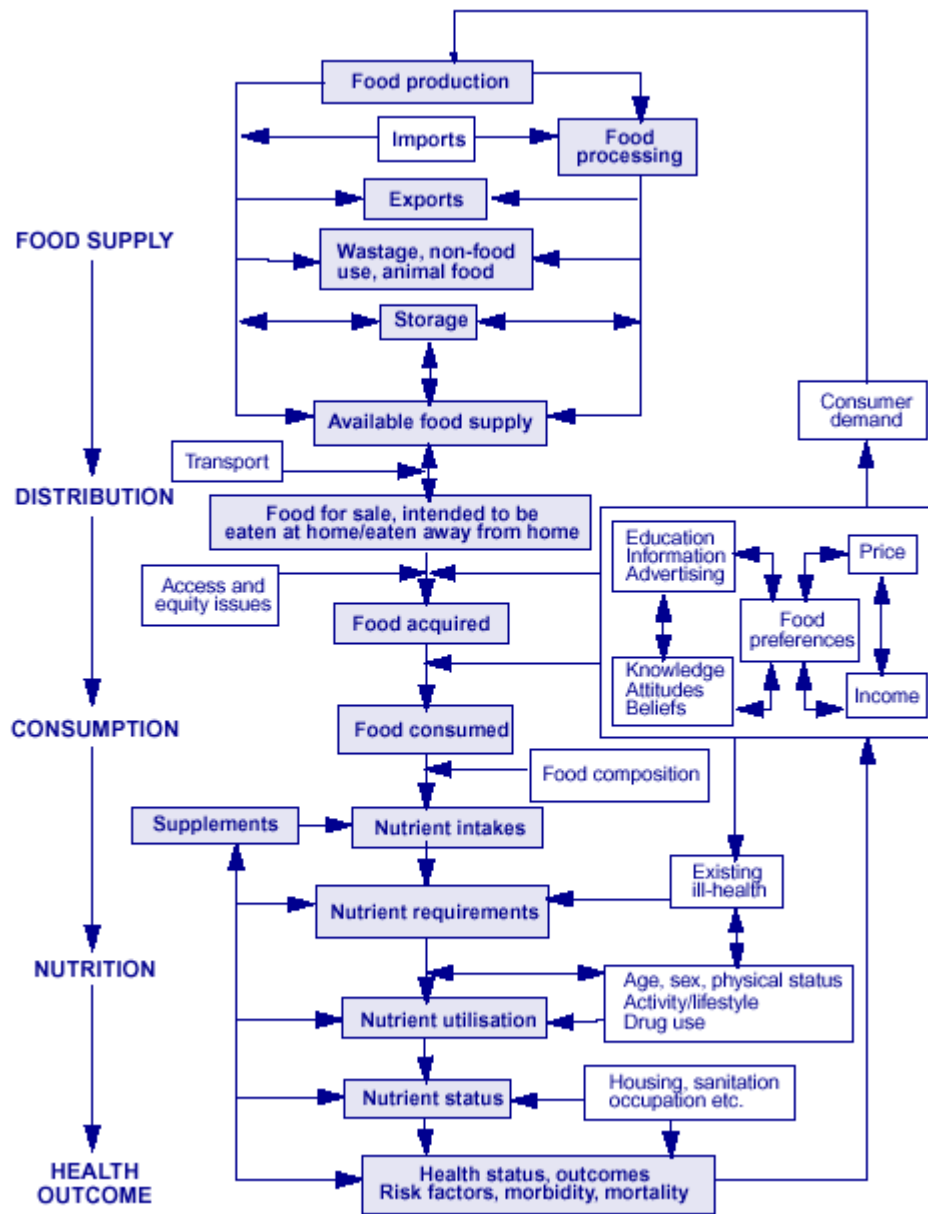
1. Enjoy a wide variety of nutritious foods
2. Eat plenty of breads and cereals (preferably wholegrain), vegetables (including legumes) and fruits
3. Eat a diet low in fat and, in particular, low in saturated fat
4. Maintain a healthy body weight by balancing physical activity and food intake
5. If you drink alcohol, limit your intake
6. Eat only a moderate amount of sugars and foods containing added sugars
7. Choose low salt foods and use salt sparingly
8. Encourage and support breast-feeding.

Guidelines on specific nutrients

1. Eat foods containing calcium. This is particularly important for girls and women
2. Eat foods containing iron. This applies particularly to girls, women, vegetarians and athletes.

APPENDIX 3

THE AUSTRALIAN FOOD AND NUTRITION SYSTEM – AN OVERVIEW



Taken from: Lester IH. Australia's food and nutrition Canberra: AGPS, 1994.

APPENDIX 4

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- * Thanks also to all administrative staff from the Department of Human Services who assisted in the preparation of these documents.

APPENDIX 5

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