

Inquiry into the Obesity Epidemic in Australia

Submission to the Select Committee into the Obesity Epidemic in Australia (Commonwealth)

July 2018

**Prepared by: Federation of Parents and Citizens Associations
of New South Wales**

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Introduction

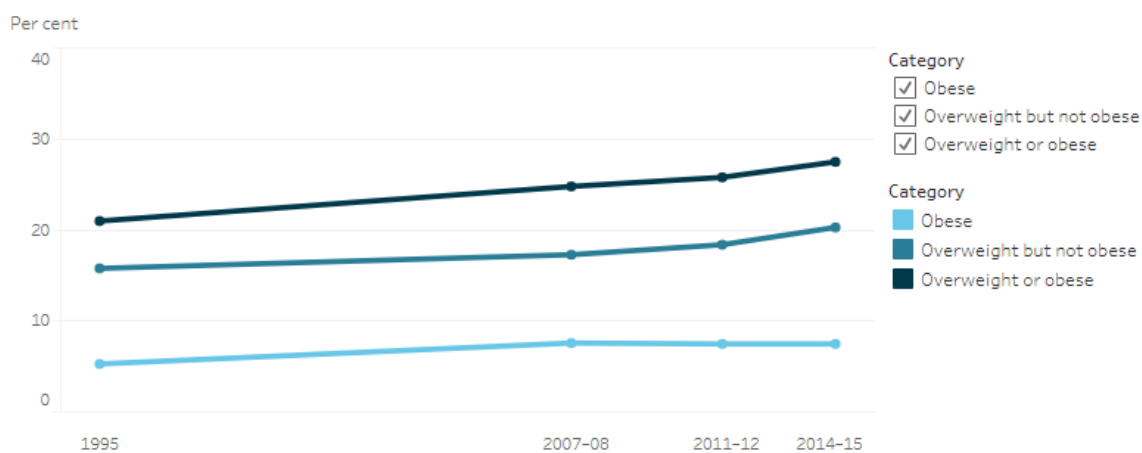
Federation of Parents and Citizens Associations of New South Wales (P&C Federation) is thankful to the Select Committee into the Obesity Epidemic in Australia for this opportunity to contribute feedback into this inquiry into the obesity epidemic in Australia. P&C Federation supports the position of individual educational and developmental needs met by a range of differential services expressed through appropriate and well-planned curricula, programs and environments conducted by sensitive and well-trained personnel in conjunction with parents¹ and families.

The core belief of P&C Federation is that the education of our children and youth is the most fundamental means of ensuring individual and collective success and, as a result, our greatest national resource.

P&C Federation’s response to this Inquiry is guided by our support for encouraging nutritious diets and active lifestyles for children, and our belief that any strategy to address this must necessarily include schools and parents, as well as Government and the wider community.

P&C Federation Response

P&C Federation acknowledges that there are numerous initiatives at Federal and State levels to encourage both healthier eating and more active lifestyles among children, whether it be compulsory school sports courses to requiring school canteens to meet certain nutritional requirements. However, that the most recent statistics show about a quarter of Australian children and adolescents (26%) are obese and/or overweight suggests these initiatives may be lacking. The scale of childhood obesity has increased steadily over time, with 21% young people aged 5-17 in 1995 being classified as obese or overweight (Figure 1).



* Calculated based on an approximated standard error for the sum of the estimates for 'Overweight but not obese' and 'Obese'; the resulting approximated CI is wider than the exact CI would be.

Figure 1: Proportion of overweight and obese children aged 5-17, 1995 to 2014-15 (Source: Australian Institute of Health and Welfare)

¹ “Parent” refers to anyone with legal care of a child, such as a parent, carer or legal guardian

In a 2016 report on childhood obesity, P&C Federation noted the following nutritional challenges for children and parents:²

Children's barriers:

- Resistance to healthy foods. Refuse to try anything new, or reject foods.
- Advertising - children see far more ads for unhealthy foods than ads for fruits and vegetables. Healthy foods are less appealing to children because they are not as aggressively marketed as snack foods and convenience foods (such as pre-prepared ready meals).
- Parents and wider family are sometimes not ideal role models.
- Unhealthy foods (characterised by being highly refined and calorie dense) are tasty but they take far more to feel full compared to healthier foods that include fruit and vegetables. So instead of a small amount as a snack, a child eats more of the unhealthy foods until they feel full. In this way, they can eat a full day's calorie allowance just in the playground. And if they go home to fast food as a family meal, their calorie intake far exceeds their daily allowance and needs.
- Fresh fruit and vegetables may be hard to get and expensive in regional and remote areas.
- Peer group pressure to reject healthy eating options and eat unhealthy snack foods instead.

Parental barriers:

- Change to family structure and dynamics: Many families have the challenge of both parents working, and working long hours. Other families may be a sole parent again working long hours who runs the household and can be looking for fast options to increase family time.
- Competing needs work and family: Parents can be time poor because balancing work and family is difficult. While employers report that they are family friendly, this is not the case in practice. So the needs of work commitments cannot always fit around running a family.
- Long work hours and long commutes mean parents have limited time to play and be active with children. This also restricts their ability to walk children to school or home again.
- Parents can choose for convenience: Processed foods are quicker to prepare for a family meal.
- Processed and take away foods can be attractive to many parents who are time-poor.
- Some Parents may have their own poor diet or exercise habits which could negatively influence their children.
- Parents can find it difficult to change their own food choices to healthy and homemade, and/or motivation to do more physical activity. This is often as a result of diet and long hours in employment activities, be it at work or commuting.

General barriers:

- Whole population is more sedentary
- Children no longer walk/pedal as transport
- Fear around stranger danger, predators etc
- Less likely play outdoors after school/weekends
- Possibility of schools losing play space due to slated possibility of high-rise schools, especially in dense metropolitan areas

² P&C Federation. 2016. *Submission in Relation to the Review of Childhood Overweight and Obesity*. August. Submission to Standing Committee on Social Issues.

- Children get less incidental exercise (partly due to so many labour saving devices)
- Change in children entertainment; screen time is often used as babysitter
- Socialise with friends outside of school on screens/internet
- Different ethnic groups may be more susceptible to obesity, whether genetically or due to diets associated with a given culture
- Costs associated with sports
- Not enough facilities or facilities (infrastructure; playgrounds, skate parts)
- Parents don't model good behaviours and exercise
- Parents do not have time for active play with children or planned activity.

The rate of childhood obesity differs markedly across demographic groups, and therefore there must be a concerted effort to ensure no demographic group is overlooked in any strategy to tackle childhood obesity. For instance, Government figures show nearly a third of Indigenous children aged 2-14 were obese or overweight. Childhood obesity is also more likely in remoter areas, with over a third of young people aged 2-17 (36%) being obese or overweight compared to 25% in major cities (Figure 2), and in lower socio-economic groups, with 35% of young people in the lowest socioeconomic group being obese or overweight compared to 23% in the highest socio-economic group.³

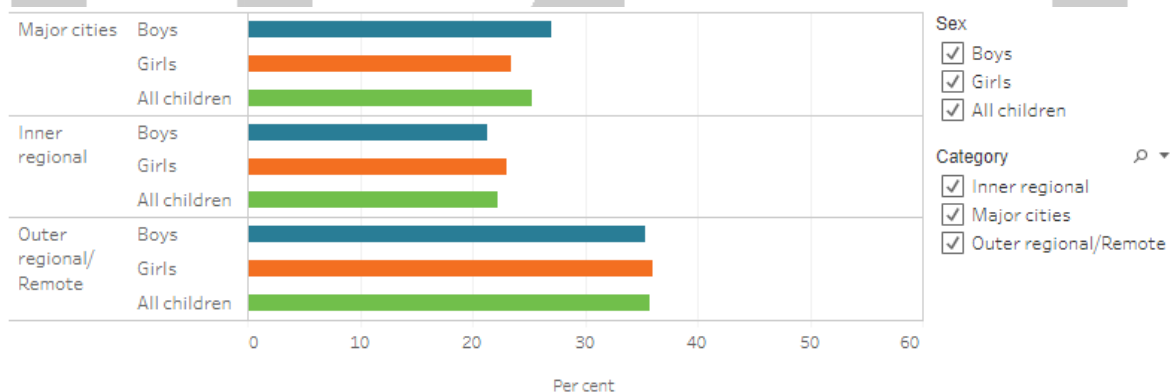


Figure 2 Proportion of overweight and obese children aged 2-17, by remoteness area (Source: Australian Institute of Health and Welfare)

Currently, efforts to improve child health and fitness, while commendable in their own right, are often short-term and small in scale. We believe any strategy to reduce childhood obesity needs to be multi-pronged, and involve a variety of agencies and Government departments. It must be comprehensive enough to ensure demographic groups with particularly high rates of childhood obesity are not neglected. Although it is beyond the purview of P&C Federation to devise such a comprehensive strategy in detail, we do believe families and the education system must be central to any such strategy. Below we outline factors for both schools and families that we believe should be considered in any strategy to tackle the childhood obesity epidemic.

³ Australian Institute of Health and Welfare. An interactive insight into overweight and obesity in Australia. Updated 24 November 2017.

Schools

Fresh food in school canteens

In New South Wales, the Department of Education in 2017 launched the Healthy Schools Canteen Strategy for school canteens, under which foods with a Healthy Star Rating (HSR) under 3.5 should not be sold in canteens. We acknowledge this as a recognition by the State Government of the need to encourage healthier lifestyles in children, however it would be preferable to have a consistent nation-wide strategy for schools. It should also be noted that the HSR system should not be the sole measure of nutritiousness, as there have been several cases where unhealthy foods gain a positive HSR rating (for example, until recently Milo bars would have had a 1.5 star rating, but gained 4.5 stars due to use of skim milk, while high-sugar fruit yoghurts can rate higher than full-cream unsweetened yoghurts due to their fruit content).⁴ It is therefore important that a strategy for nutritious canteens not only rely on the HSR, but make active efforts to provide fruits and vegetables and other fresh foods to students. For example, it may be feasible to require a certain portion of ingredients in school canteen food to consist of fresh products. It would also be advisable to explicitly ban event sponsorship from fast food outlets for school events, and ensure that fast food outlets are good corporate citizens when it comes to their messaging to children.

Campaign for water as the only beverage

We believe that having water as the only beverage is associated with maintaining a healthy weight. Water is cheap, accessible and schools can easily encourage children to drink water only. It is very easily implemented because, unlike some nutritional strategies, drinking water does not call on parents to be change agents. As well as providing bottled water, this may include investing in more water fountains in public schools.

Annual health or fitness exams

Some alarming studies have shown that between a third and half of parents with overweight or obese children do not perceive that their children have a health problem.⁵ We therefore suggest the Committee consider the possibility of having yearly health and fitness check-ups for children in public schools. This has been implemented in the City of Amsterdam in the Netherlands, which reduced its child obesity levels by 12% with its anti-obesity programs.⁶ We would encourage the Government to investigate what factors led to this reduction, and how and whether they can be implemented in an Australian context.

Encouraging physical activity

P&C Federation is in support of schools encouraging physical activity that is not dependent on being parent-led.

⁴ ABC. 2015. Do higher food star ratings always mean a healthier choice? 10 September

⁵ Meir, K., et al, (2016) "Water as the Primary Beverage: a Predictor of Pediatric Obesity" *Journal of Nursing Education and Practice* Vol 16(10). 65-70.

⁶ Bosley. 2017. Amsterdam's solution to the obesity crisis: no fruit juice and enough sleep. *The Guardian*. 15 April.

There are two forms encouraging physical activity may take:

Curriculum:

- Some schools have physical activity as homework, eg running, skipping, bike riding, playing a game or sport training
- Parent-helpers for sport lessons, events and carnivals encourages participation by our children
- Encourage parent and teacher participation in sports curriculum set a good example.

In-school time:

- Schools can set up fitness stations on the school's oval or playground
- Sport and activities accessible to all students performing at all levels, not just competition level
- Run regular healthy living competitions/challenges for all students and all classes.

Outside School

Absence of fresh food

Many areas of Australia have a relative lack of fresh food outlets such as green grocers, compared to less healthy food outlets such as fast food franchises or takeaway shops. This means that people who want to provide fresh food for their children or for their school canteen may be unable to do so, due to the unavailability of fresh foods within a readily accessible distance. We therefore suggest governments work with developers to improve the accessibility to fresh foods in existing communities. Moreover, when a new community is being developed, the developers should be required to ensure a supermarket and green grocer are present. Finally, considering Australia has copious currently arid land that could be converted for agricultural use, we encourage the Federal Government to investigate the possibility of investing irrigation systems to produce more food and thereby reduce the costs of fresh food.

Encouragement of physical activity

Considering the costs of enrolling a child in many sports programs, P&C Federation has long believed the Government should offer a rebate to cover the costs. We note that the New South Wales Government this year has implemented the Active Kids Rebate, under which parents can claim up to \$100 per school-aged child per year to reduce the cost of sport registration or membership fees for after-school and weekend sport, and active recreation activities.

While this rebate is unquestionably a positive step, we do suggest it could be further supported by Federal rebates, considering childhood obesity is a nation-wide epidemic. In a survey conducted by P&C Federation of its members about the survey, over 80% of respondents said they are using the rebate, and many were appreciative of the fact that it has helped their child become more involved in sports. At the same time, \$100 covers only a small portion of the costs of getting a child involved in sports, and 62% of respondents indicated it was not fully sufficient in getting their child involved in sports. Federal rebates could further alleviate these costs for New South Wales parents, as well as provide a nation-wide encouragement for physical fitness.