# FNM News

FOOD AND NUTRITION MONITORING NEWS • NUMBER 1 • JULY 1994

### Nutrition monitoring at AIHW

The Australian Institute of Health and Welfare (AIHW) is an independent Commonwealth statutory authority whose mission is 'to inform community discussion and to support public policy making on health and welfare issues by coordinating, developing, analysing and disseminating national statistics on the health of Australians and their health and welfare services, and by undertaking and supporting related research and analysis'.

The Nutrition Monitoring Unit is located in the Health Monitoring Division of the Australian Institute of Health and Welfare. It was set up as one of the implementation strategies of the National Food and Nutrition Policy announced in September 1992 and is currently funded under the National Health Advancement Program by a grant from the Commonwealth Department of Human Services and Health.

The task arising from the Policy implementation is to develop and implement (in consultation with key players) a National Food and Nutrition Monitoring and Surveillance Strategy.

## Australia's food & nutrition

The first phase of the development project was to produce a benchmark report—Australia's food & nutrition—published in June this year. It brings together, for the first time in one volume, information from all sectors of the food and nutrition system in Australia.

### Australia's food & nutrition

a comprehensive guide to the food and nutrition system

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It covers the national context in which food and nutrition policy is determined, and the effects of a wide array of influences—social, cultural, physical, financial and informational—on what Australians choose to eat: it covers the role of food production, food manufacturing and retailing on food choices, and the attitudes, beliefs and knowledge that affect choices. It pulls together information on the nutrient composition of the food supply, and food, nutrient and non-nutrient intake.

It examines the relationship of food behaviour with nutritional status and health outcomes, at the national level and, together with determinants of nutrition-related inequalities, for subgroups within the population that are nutritionally disadvantaged. Gaps and deficiencies in the information base are identified and ways in which

existing data collections could be enhanced to give better information are considered. It constitutes an important resource for all those whose work involves food and nutrition in Australia and is a readable overview for anyone with an interest in this area.

## The consultation process

This second phase of the project commenced in January 1994. Discussions were held with several of the key players in each State and Territory with the aim of determining monitoring needs and priorities at State and Territory and regional level. Information was sought on routine data collections with the potential to provide data useful for the national monitoring strategy. The possibilities of 'collaborative resourcing' for specific data collection projects that could demonstrate the value of such collections for the strategy were discussed. Another issue was the provision through the strategy of feedback in a useful and timely manner to users, including those who are collecting the basic data. Opinions were sought on priorities for data collection, in particular, about what should be core data, and what attention should be given to initiating data collections to fill gaps in important areas.



### Consultations: round 1 (January– April 1994)

One need identified by many of those contacted was for the dialogue to continue. *FNM News* has been initiated as part of the dialogue and it is hoped that it will provide the forum for that dialogue over the next two years of the national monitoring strategy development. External contributions are encouraged.

From this first round of consultations, it was clear that the National Policy commitment to ongoing monitoring and surveillance had wide approval.

### AIHW, the National Food Authority and the National Nutrition Survey

Several people contacted were unsure of the specific role of the Institute. The Institute does not normally conduct surveys, but collates, analyses and interprets data. When the national monitoring strategy is in place, it is expected that reporting will be based on data from organisations such as the Australian Bureau of Statistics, National Food Authority, Commonwealth and State and Territory agencies and the private sector. Currently, however, the role of the Institute is to develop the national monitoring strategy.

There was some uncertainty, particularly among those dealing with food safety and hygiene, about the overlap with the functions of the National Food Authority. The National Food Authority's role includes collating, analysing and reporting on food safety and hygiene matters. It also conducts the Market Basket Survey and has the responsibility for the Australian food composition data base an essential tool for determining nutrient intakes and availability in the food supply, and for monitoring industry responses to changes in

food standards. Links with the national monitoring strategy will be in providing national data on food safety, food hygiene and food standards, and in maintaining and updating the food composition data base. The National Food Authority will use information from the strategy for assessing proposed changes to food standards and for interpretation of the Market Basket Survey.

Another issue raised was the relationship of the 1995 National Nutrition Survey to the national monitoring strategy. The National Nutrition Survey is an important component of the strategy which must cover a much wider range of data sources. The National Nutrition Survey is discussed on page 3.

# Monitoring update Central issue: compatibility, comparability

There was wide agreement that standardisation of methods would be a firm foundation for an effective, efficient national strategy. The specific points raised were:

- Comparability of sampling, coding frames and methods across surveys is necessary. Examples of ways to achieve this are:
  - -standardisation of questions used in surveys;
  - -the use of a single Australian food composition data base for nutrient calculations;
  - -agreement on a common set of demographic data.
- There is a need for standard, clear, agreed definitions for basic measures and indicators, for example, birthweight (low birthweight), obesity, or an answer to the question 'what is a serve?'.
- There is an identified need to establish and to specify the appropriate uses of indicators or markers of change as a means of monitoring some factor within the food and nutrition system.

We see the establishment of such key indicators as an early priority (see page 4).

#### Other data issues

- Because national surveys will almost always lack the power to provide information at the regional level, priority should be given to identifying ways in which State and regional collections could be linked to national data for comparison.
- There should be a capability to provide information on subgroups of the population.
- A high priority was for better, faster access to data from largescale surveys, for example, from the 1995 National Nutrition Survey.
- There is a need to provide feedback on results of routine data collections to those collecting the data. The prime example is the collection of data on breastfeeding prevalence. Victoria, for example, has collected breastfeeding data for more than 50 years, but the current perception that 'nobody uses them' jeopardises their continuing collection.
- There is a need to adapt existing data collections to provide better data for nutrition monitoring, and for baseline data where currently none are available. The major gaps in information are:
  - -retail level food data between the apparent consumption (food supply) and dietary intake data. The best prospect for filling this gap was seen to be to find ways to use supermarket scanning data;
  - -age groups for whom there are few intake data, for example, children under eight years, those aged 15–25 years, and those aged 70 years or more;
  - -links between food intake data and direct measures of nutritional status and health outcomes.

### The 1995 National Nutrition Survey

Twelve years after the last National Dietary Survey of Adults and ten years after the National Dietary Survey of Schoolchildren aged 10-15 years Australia will, for the first time, have nationally representative data on the food intake of individuals of all ages from two years and upwards. Like the most recent national dietary surveys, which were conducted in conjunction with other major surveys, this dietary survey is to be conducted in conjunction with the 1995 National Health Survey. The National Nutrition Survey is being conducted for the Commonwealth Department of Human Services and Health by the Australian Bureau of Statistics and will be the first dietary survey to be conducted under the statistics legislation. The major advantages of conducting the nutrition component of the survey in this way are that it provides more authority for the nutrition survey, simplifies the relationship with respondents participating in both the Health and Nutrition components of the survey, facilitates access arrangements for combined National Health Survey and National Nutrition Survey output and assures respondents of the confidentiality guaranteed by statistics legislation.

## How is the survey being planned?

A workshop held at the end of August 1993 under the sponsorship of the National Health and Medical Research Council and the Department of Human Services and Health reached broad agreement on the objectives of a national nutrition survey.

- Monitor food intakes
- Assess changes over time in dietary habits and nutritional status
- Monitor the impact of Australia's National Food and Nutrition Policy

#### **FNM News**

- Assist with the development of food policy and regulations
- Provide information on the inter-relationship of health, social, economic and nutrition variables
- Provide a basis for nutrition education and for other strategies to improve nutrition

Following the workshop the National Nutrition Survey Advisory Committee, which has representatives of Commonwealth and State Health authorities, government and non-government agencies, industry organisations, professional and academic institutions, was established to oversee the survey development and to assist the lead agencies in resolving conceptual issues. A small number of expert panels were also set up to make recommendations on various aspects of the survey methodology. The Committee has already met on two occasions and a further meeting is scheduled for after the survey Dress Rehearsal which is to take place in August-September 1994.

## What information will be collected?

At the time of writing a number of aspects of the survey methods have still to be finalised. However, it has been agreed that information on the foods consumed by individuals aged two years and over will be collected by means of a 24-hour

dietary recall interview to be conducted in the home. In addition information will also be collected on other aspects of food use and acquisition by the household and on the 'usual' frequency of consumption of selected foods over the past year. Weight, height, waist and hip circumference will be measured on all participants and blood pressure on those aged 16 years and over. The funds available for the survey are insufficient to permit inclusion of any direct measures of nutritional status other than the physical measurements listed above. Given recent NHMRC recommendations for the fortification of some foods with folate and proposed revisions to the standard for addition of vitamins and minerals to foods this is a major omission.

# Who will be included in the National Nutrition Survey?

The National Nutrition Survey sample will be selected from households responding to the National Health Survey. Two respondents will be randomly selected from each household. This sampling strategy is expected to give an effective National Nutrition Survey sample of around 14,500 respondents which will permit national estimates of dietary patterns by fine age group and sex and comparisons by broad age group (<25, 25-44, 45-64 and 65+) at State, capital city, regional and major population sub-group level.

#### For further information

Information about the National Nutrition Survey is available from:

Mel Butler, PO Box 10, Belconnen ACT 2616 Tel: (06) 252 5486 Fax: (06) 253 1673

or Barbara Brown, GPO Box 9848, Canberra ACT 2601 Tel: (06) 289 8087 Fax: (06) 289 8121

# **Key Indicators Project**

The principal task for the AIHW Nutrition Monitoring Unit in 1994–95 is the development of a set of key indicators for monitoring changes in the food supply and in the nutritional status of Australians. The first step in this task is to identify and define an agreed minimum set of key indicators as the basis for developing a longer-term strategy for food and nutrition monitoring and surveillance.

### What is a key indicator?

It is a practical measure of change in some important aspect of food availability, quality or use or in some aspect of nutritional status and which can be monitored on a regular basis either by means of routinely collected data such as Apparent Consumption and vital statistics or from data which can readily be collected from the relevant group by means of a questionnaire or interview.

Clearly many aspects of the food supply and of nutrition and health related outcomes could be useful to those concerned with the planning and evaluation of food and nutrition policy and programs. The Key Indicators Project cannot hope to address all these needs in the short term and thus the focus in the first instance is on the definition and development of a 'minimum' set of key indicators to address national and State nutrition goals and targets and to monitor food availability, access and safety.

#### US Public Health Service National Nutrition Objectives for 2000

- 1. Reduce coronary heart disease
- 2. Reverse the rise in cancer deaths
- 3. Reduce prevalence of overweight
- 4. Reduce growth retardation
- 5. Reduce dietary fat intake and saturated fat intake
- 6. Increase vegetable, fruit and grain consumption
- 7. Increase proportion of people who attain appropriate weight by sound dietary practices combined with physical activity
- 8. Increase calcium intake
- 9. Decrease salt and sodium intake
- 10. Reduce iron deficiency
- 11. Increase proportion of mothers breastfeeding
- 12. Increase proportion of care givers who use feeding practices preventing baby bottle tooth decay
- Increase proportion who use food labels to make sound choices

- 14. Achieve useful and informative labelling for virtually all processed food
- 15. Increase the number of products reduced in fat and saturated fat
- 16. Increase proportion of catering services that offer low-fat choices
- 17. Increase proportion of school lunch and child care services providing menus consistent with nutrition principles
- 18. Increase receipt of home food services by those in need
- 19. Increase proportion of schools providing nutrition education
- 20. Increase proportion of worksites that offer nutrition education
- 21. Increase proportion of primary care providers providing nutrition counselling and or referral

In order to do this the Nutrition Monitoring Unit seeks input from all those with an interest in this area in the form of a priority listing of the 10 food and nutrition related objectives for which they consider it most important to have key indicators. The Unit will then collate this information to establish a priority ranking for the definition, development and evaluation of relevant measures. Please confine your objectives, at this stage, to ones which have some hope of being addressed either by the enhancement of existing datasets or by means of questionnaire based surveys.

As food for thought an abbreviated version of the US Public Health Service National Nutrition
Objectives for 2000 is given in the box. Note that these do not address food availability, access and safety issues which have been identified as important in the Australian context. Responses including these issues are welcomed.

For additional copies of *FNM*News, or for inclusion on the mailing list, please contact

Peter Blanken by telephone on (06) 243 4027 or fax (06) 257 1470.

### Responses please! Closing date is 30th August 1994 Responses please!

Send priority lists to:

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Don't miss out. Your input is important