



Public Health Bulletin

● Volume 8
● Numbers 6-7
● June-July, 1997

NSW HEALTH
DEPARTMENT

ISSN 1034 7674
State Health Publication No. 97-0124

The NSW Food and Nutrition Monitoring Plan and its companion publications (describing suggested methods for use in dietary surveys, monitoring overweight and obesity, and food supplied by school canteens) will be issued soon. The plan is a key step in the implementation of aspects of the strategy described in *Food and nutrition directions for NSW: 1996-2000*, which was launched by the Minister for Health in December 1996. This edition of the Bulletin features the major elements of the plan.

NSW FOOD AND NUTRITION MONITORING PROJECT

GUEST EDITORIAL

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New South Wales can take pride in having one of the world's best food supplies, yet diet-related disease is commonplace. Poor nutrition is a major risk factor for cardiovascular disease, stroke, some cancers, diabetes mellitus, osteoporosis, dental caries and iron-deficiency anaemia. The potential years of life lost to age 65 because of diet-related disease are 70 per cent of those lost because of smoking¹.

The NSW Health Department has recognised that nutrition is a high-priority issue for health promotion and disease prevention, and has initiated important policies for public health nutrition. These include developing explicit nutrition goals and targets, dissemination of a State food and nutrition strategy, and incorporation of nutrition indicators into Area Health Service performance agreements. Such developments increase the need for information by those who are required to plan, monitor, evaluate, argue for, and make decisions about, nutrition programs at State and local levels.

Nutrition monitoring is a key objective of the State food and nutrition strategy. In recent years the NSW Health Department has undertaken some major nutrition-monitoring projects in collaboration with the Nutrition Unit of the Department of Public Health and Community Medicine, University of Sydney.

These began with a landmark publication called *Food and nutrition in NSW: a catalogue of data*². Given the size and complexity of the food and nutrition system and the fact that useful data are located outside the health system, the catalogue was designed to compile relevant fragments of nutrition data into a coherent, accessible form. This project generated baseline data, which is vital for setting State targets and benchmarks for measuring progress. It also clarified strengths and limitations of, and gaps in, the available nutrition data.

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Monitoring overweight and obesity

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- Women's Health Study: a longitudinal survey, 1996-2016; the baseline survey was conducted in 1996 on women aged 18-22 years, 45-49 years and 70-74 years (n=12,000-15,000 in each cohort).
- Blue Mountains Eye Study: Stage 1, 1992-1994, Stage 2, 1997-1998; includes measured weights and heights on people aged 50 years and over (n≈3,500).

Using a variety of surveys to obtain weight status information enables us to construct a picture of the weight status of various population groups. Use of the guide to plan or modify these surveys will ensure that standard methods are used for the collection and interpretation of weight status data.

CONCLUSION

Information alone is not sufficient to solve the problem of overweight and obesity. But the regular supply of information may continue to draw attention to a problem that requires more intensive and creative solutions than it has had in the past. Such information should lead to better planning, problem-solving and action. As plans for implementation of the National Obesity Strategy become more concrete^{7,14}, NSW plans can be expanded.

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Guest editorial

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The second project concerned a more systematic approach to nutrition monitoring in NSW. While developing the catalogue was worthwhile, it became clear that there was a need for a coordinated approach if we were to furnish timely, relevant nutrition information to users: NSW Health Department planners, Area personnel and those in other agencies. The Department decided to develop a monitoring blueprint to complement the proposed national monitoring and surveillance plan and reflect the needs of the NSW Food and Nutrition Strategy, including the ability to monitor change among nutritionally vulnerable groups.

The articles in this issue report on the four main "products" of the second project. The first is an overview of the NSW Nutrition Monitoring Plan, which provides a blueprint for coordinated Statewide monitoring, and includes recommendations for collection, analysis and dissemination of timely and relevant nutrition information.

The second is a set of recommended short modules – that is, sets of questions or scales – for use in population-based surveys that lend themselves to the assessment of nutrition issues. These are interim recommendations, based on the best available information at the time of publication. They do not replace the need for continuing research and development, at the national level, into the best short modules for nutrition monitoring. Adoption of these interim recommendations by those who conduct population-based surveys in NSW will improve comparability of national, State and local survey data and lead to a clearer picture of progress towards State nutrition goals and targets.

The third product includes guidelines and recommendations for monitoring overweight and obesity. This is an important publication, given that the NSW Health Department has set targets for prevention and reduction of overweight and obesity, and for prevention of related conditions including cardiovascular disease, hypertension and high serum cholesterol levels. Data on overweight and obesity are needed so we can assess the effectiveness of interventions and promote the prevention of overweight and obesity. Most Area Health Service performance agreements with the NSW Health Department include strategic activities and performance indicators on diet, overweight and obesity, and physical activity. Standardised methods are needed for monitoring progress and demonstrating success in reducing the population prevalence of overweight and obesity.

The fourth product is a method for standardised monitoring of the food supplied by school canteens. This is required because of the considerable investment of the NSW Health Department in encouraging the availability of healthier foods in school canteens. It is important to be able to monitor the outcomes of this investment of public money.

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