

NUTRITION ACTION

Ngā Takawaenga Hāpai Kai Hauora

update

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Guest Editorial

Working Towards the Wellbeing of Asian New Zealanders!

With a strategic aim of developing partnerships with other like minded organisations, the Asian Network Inc. (TANI) is thrilled to join the membership of Agencies for Nutrition Action (ANA) this year.

Since our establishment as a non-profit organisation in 2002, we have endeavored to promote strong and healthy Asian communities in Aotearoa New Zealand. Reducing health inequalities is a key focus of our work. An aspect of this has included taking a lead role in promoting and facilitating research to address knowledge gaps about New Zealand's Asian communities.

In 2002, we played a key role in publishing the Asian Public Health Project¹. Its purpose was to inform decision-makers, programme planners and other interested parties on how to better respond to the increasing public health needs of Asian people living within the Auckland region. Among other health issues, lifestyle associated conditions such as cardiovascular disease and diabetes were highlighted as increasing issues for Asian communities.

In 2005 we published our first systematic review Asian Health in Aotearoa: An Analysis of the 2002/03 New Zealand Health Survey². This review was one of the first to highlight issues of physical inactivity and poor nutrition between Asian and NZ European communities.

More recently reports such as the Asian Health Chart Book 2006³ and Asian Health in Aotearoa in 2006 - 2007: trends since 2002-2003⁴ have helped to further raise the awareness of the health needs of New Zealand's Asian communities.

Collaboration and partnerships are one of our key values. Our inception began with a partnership between Auckland Council (then Auckland City Council), an Asian Health Steering Committee and various community leaders. Since then developing networks and connecting up diverse Asian communities has been a focus of our work. Through our partnership with ANA we look forward to having a more coordinated and cohesive approach to addressing Asian health issues related to physical activity and nutrition.

In the next five years, our plan is to continue advocating for the welfare of Asian communities. We welcome anyone interested in promoting Asian health to join our network and participate in our upcoming forums and events.

For further information visit www.asiannetwork.org.nz/ or email me on vishal.rishi@asiannetwork.org.nz.

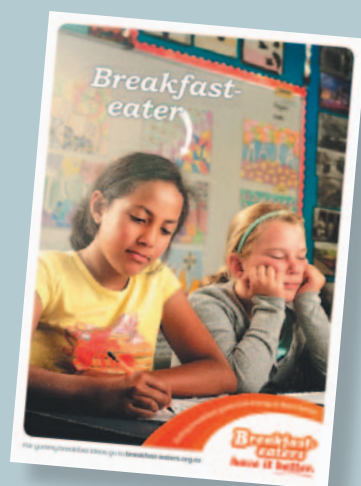
Vishal Rishi
Programme Manager
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Refer page 8 for References



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Conference Countdown



The date is 3-4 May 2011. The venue is the Rendezvous Hotel, Auckland. Abstract submissions have closed, plenary sessions and social events are planned. With a programme tailored for those with an interest in nutrition and/or physical activity, the conference is gearing up to be the most anticipated event of the 2011 calendar. There are just a few things that still need mentioning.

An updated registration brochure is now available at www.ana.org.nz/conference11/. You will also find an updated version of the conference programme there.

Early bird registrations close on the 18th of March so make sure you register ASAP to take advantage of this reduced rate.

Earlier this month we introduced several new speakers to the conference programme. We are currently in discussions with a special guest speaker and hope to announce their attendance

shortly. For further information check out our January conference update also available at www.ana.org.nz/conference11/.

We are also thrilled to announce a free conference breakfast hosted by the Health Sponsorship Council with special guests Heather Te Au-Skipworth and Missy Mackey. Heather and Missy are the founders and organisers of Iron Māori, a hugely successful event aimed at encouraging increased Māori and Pacific participation in sport and physical activity. At this meeting they will share their journey and experiences of working with Māori and Pacific whānau as they undertake the challenge of completing an Iron Māori event. Spaces are limited and you must pre-register to attend.

For further information on any aspect of the conference contact Julia Lyon on julia@ana.org.nz or 04 499 6365.

Infant feeding practices: A cross-cultural perspective

This new book edited by Professor Pranee Liamputtong from the School of Public Health, La Trobe University, Australia provides a comprehensive coverage of infant feeding issues from a cross-cultural perspective.

Pranee writes that "Breastfeeding is a contentious issue" and this is why she wanted to put together a book that presented the broad range of issues influencing infant feeding decisions. The book includes a chapter on why Māori have the lowest breastfeeding rates in New Zealand today written by Dr Marewa Glover and Professor Chris Cunningham. The chapter focuses on factors perceived as barriers and on issues to do with health services. Key messages include that although mothers and whānau feel positively towards breastfeeding, and generally intend to exclusively breastfeed, these expectations remain unmet in many cases. Reasons for this include lack of timely, culturally relevant and comprehensive information, confusion about bed-sharing and tobacco smoking while feeding as well as self-imposed beliefs of the lack of acceptance of public breastfeeding. The relatively high rates of tobacco use in Māori was identified as a major reason why breastfeeding ended prematurely.

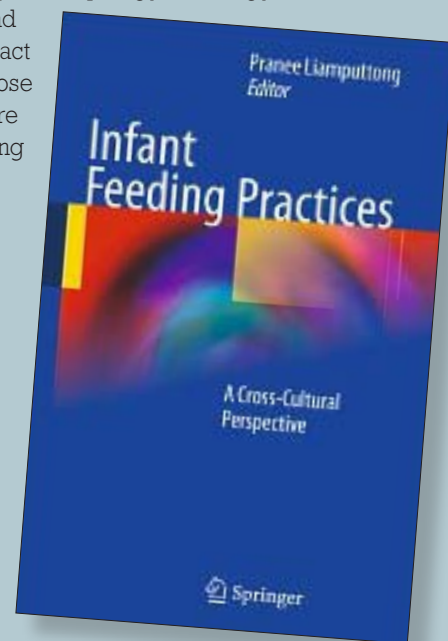
Other chapters explore the impact of social class, cultural beliefs and practices, ethnicity, socio-economic status and geographical location on infant feeding practices of women. Several chapters

discuss the challenges to breastfeeding faced by an increasing number of women living with HIV/AIDS who have infants.

The book can be used as evidence for health care providers to implement socially and culturally appropriate services and will be of interest to maternity care providers, and students and lecturers in courses like midwifery, anthropology, sociology, social work, nursing, public health and medicine. It will also attract many lay readers and those in organisations which are interested in infant feeding practices from a cross-cultural perspective.

A copy of the book can be ordered through www.amazon.com for US\$134.01 plus postage.

Published by Springer.



BREAKFAST-EATERS HAVE IT BETTER

New initiative to increase the number of breakfast-eaters

For many families breakfast-eating has been abandoned in the morning rush to get kids out the door to school. Each school week over 100,000 five to 14 year-olds miss breakfast at least one day of the week and parents are also skipping this meal.

Children who skip breakfast are more likely to buy energy-dense nutrient-poor foods and drinks on the way to school or to consume these foods later in the day.

Concerns about low rates of breakfast-eating and potential links to obesity have prompted a new Health Sponsorship Council (HSC) initiative aimed at increasing the number of Māori and Pacific children and adolescence eating a healthy breakfast every day. Promotions will also try to increase understanding about the importance and benefits of eating breakfast every day.

Why focus on breakfast?

There is evidence that eating breakfast can improve academic and physical performance, and breakfast-eating has been shown to have a relationship with a lower BMI and waist circumference.

Interestingly children who usually eat breakfast at home are approximately 20% more likely to eat 5+ a day fruits and vegetables, 24% more likely to

drink milk, 31% more likely to eat toast, and 130% more likely to eat cereals, compared to children who sometimes or never eat breakfast at home. Conversely they are significantly more likely to consume sweets and lollies, soft drinks, pies and sausage rolls.

Supporting your work

HSC wants to make breakfast the must-have meal of the day. The promotion is based on the idea that breakfast-eaters have it better – at school and at sport.

A website breakfast-eaters.org.nz (this is a sub-site of feedingourfamilies.org.nz) gives visitors information about the benefits of breakfast, as well as low-cost, easy breakfast ideas. Visit the site to order free breakfast resources and to sign up for email updates.

Radio listeners throughout the country will be able to enter competitions and listen to promotions, such as diary of an unfed radio announcer. Radio promotions are running on Classic Hits, the Māori Media Network, NiuFM and 531pi to coincide with the new school year.

Print advertisements have also been placed in women's magazines with high Māori readerships and online promotions are underway.

If you would like a more detailed Fact Pack about the promotion and/or want to get involved contact Michelle Mako on 04 472 5777 or email michelle@hsc.org.nz



Do you want to support breakfast-eating?

- Include breakfast messages in your newsletters or newspaper columns/editorials.
- Give out breakfast messages or materials at events.
- Think about how breakfast messages could be incorporated into any existing work programmes.
- Include breakfast messages in 'back-to-school' information for parents and caregivers.
- Send media releases containing breakfast messages to your local media to encourage breakfast eating in your community.
- If you have a radio slot, share some breakfast messages with your listeners.
- If you are interviewed by your local media, try to include some breakfast messages in the information you provide.
- Put a link to breakfast-eaters.org.nz on your website.

New recipe book: Healthy kai the whānau will enjoy

Te Korowai Hauora O Hauraki recently produced this book of low cost, easy, healthy, whānau recipes. Some are old favourites but with a few changes to meet the healthy kai kaupapa and some are new ideas to ring the changes.

General Manager, Gwendoline Welburn, said the book makes healthy cooking easier, with recipes for meals and snacks, and ideas for using leftovers. It also includes tips on small changes that can make meals healthier.

The recipe book was produced with HEHA funding, through Waikato District Health Board's Healthy Eating Healthy Action programme. Mrs Welburn said that "In our work, we struggled to find appropriate recipes that were whānau focused, nutritionally sound, and budget conscious. There are a lot of cookbooks around but we wanted recipes that would feed a whole whānau, are cheap and healthy, and use ingredients

people are likely to already have in the cupboard."

The book is easy to follow with one recipe per page and a photo of each recipe, and can also be used for community cooking classes. Recipes have all been independently prepared so we know they work, our dietitian has checked that they are healthy and our whānau have been the taste panel who gave the final tick of approval.

Limited copies are available for \$10 each plus postage from Shana Allan shana.allan@korowai.co.nz. It is also free to download from www.korowai.co.nz or www.waikatodhb.govt.nz/HEHA.



Food costs for families

An analysis of the proportion of the minimum wage and income support benefit entitlements that families need to purchase a healthy diet

Limited financial resources are frequently associated with food insecurity and its consequences of poor nutrition, obesity and related health conditions. Regional Public Health (RPH) identified the need to quantify and build further evidence of the links between income and food insecurity. An increased understanding of the economic barriers to accessing healthy foods supports our work to improve nutrition and health outcomes for vulnerable populations.

New Zealanders spend on average 16% of their income on food. An Australian paper has suggested that no more than 25% of disposable income should be spent on food and 'food stress' is believed to be experienced when more than 30% of income is needed.

This project assessed the proportion of the minimum wage and income support benefits entitlements (unemployment, domestic purposes and sickness benefit) required to purchase a healthy diet. Six family income scenarios were designed and 'basic' food costs to meet their nutritional requirements were calculated from the Otago University Food Cost Survey. The percentage of each family's income needed to adopt a healthy eating pattern was calculated both before and after rent was paid.

Our findings reveal that low income families need to spend between 23-53% of their net income or 42-75% once rent is deducted, to purchase a 'basic' healthy diet. Almost 49% of net income or 74% after a family on the Sickness Benefit pays rent would be required to cover expenses of \$337 if a healthy 'basic' diet were to be consumed. A disposable income of only \$120 each week would remain after rent for this family of six, to purchase all other sundries including household and personal cleaning products, power, transport, telephone and clothing.

Families on low incomes need to spend a high proportion of income to be able to purchase a healthy diet with people requiring special diets facing even greater financial burden. Many families will have little option but to compromise their food choices and 'food stress' is likely to be prevalent. The knowledge that poor food choices can stem from a lack of money raises the concern about the feasibility, futility and ethics of promoting healthy diets to such groups. This work supports other local and international evidence that healthy eating will be unachievable for many families.

While income is a well recognised barrier to healthy food this work highlights this issue in a new way and provides more

evidence to support and empower communities to influence policy makers to tackle the wider issues of where we live, work and play. RPH is working to address economic barriers by supporting the development of community markets and gardens in vulnerable Wellington communities. A greater understanding of the barriers to accessing the disability allowance for special diets is also being investigated. Workshops are being offered to promote a more collaborative inter-sectoral approach to addressing the issues of income adequacy and the accessibility to lower cost healthy foods. Working on these wider determinants of health are essential as part of the solution to improve access to healthy eating and a reversal in obesity and nutrition related health trends.

Please refer to the RPH website www.regionalpublichealth.org.nz/Article.aspx?ID=2401&Mode=1 for a copy of 'Food Costs for Families' paper, or if you would like to discuss this work further please contact Vicki Robinson on 04 3850413 or Vicki.Robinson@huttvalleydhdhb.org.nz.

Vicki Robinson
Regional Public Health
(for the greater Wellington region)

Putting the squeeze on chronic disease



The countdown has begun to September 2011, when the United Nations will hold its first high level meeting on chronic non-communicable diseases in New York. This meeting has been dubbed as a 'once in a generation opportunity' to put reducing chronic diseases firmly on global and national agendas. It is hoped that this meeting will see the launch of coherent strategies for action against diseases such as cardiovascular disease, diabetes and cancer.

To coincide with this meeting, over the last five years, leading researchers in the area of chronic disease have convened to deliver three editions of the Lancet, designed to strengthen the evidence for chronic disease prevention¹⁻³.

The articles contained in each series provide illuminating perspectives on this topic from a global perspective, but what does this mean for New Zealand?

Most New Zealanders are aware that chronic diseases such as cardiovascular disease, cancer and diabetes continue to have a large negative impact on our nation. In 2007, these diseases were responsible for approximately 75% of all deaths⁴.

Poor nutrition and physical inactivity are firmly established as two of the leading risk factors for these diseases. Consequently many assume that in delivering policies and programmes designed to promote healthy eating and regular physical activity, we will prevent a large number of these deaths from occurring. Thus, strengthening the case for prevention over treatment.

However researchers argue these approaches tend to delay the onset of these chronic diseases rather than prevent them all together⁵. So how do we justify investment in prevention, if everyone is going to require treatment eventually?

With a new Government and economic recession we have seen a major review

of the way our health dollar is spent. The fact is, demand for healthcare has risen far faster than the resources in our health sector can match. Large parts of this are due to the continued rise of chronic diseases for which there is no cure and therefore require long term medical care.

It is time for public health to review the cost-effectiveness of our interventions and policies, to ensure we are maximising our returns. To build our evidence supporting the fact that returns on investment in prevention are greater than those for treatment. Economic modelling suggests that for high income countries, such as New Zealand, intervention cost often exceed reductions in health-care expenditure, while the reverse is suggested for low and middle income countries⁵. Rather than dismissing the use of preventative interventions, I believe this reinforces the need to ensure our policies and programmes target those most in need (i.e. individuals and communities with a low socioeconomic status) where the health gains may be greatest, and thus the return on investment.

Over the last year a number of international publications have strengthened the case for prevention, supporting the argument that cost effective interventions do exist. These include the World Health Organization report, What Works, and Victorian Government ACE-Obesity report^{6,7}. As highlighted in the third and final Lancet series, population awareness raising campaigns, financial measures that promote the accessibility of healthy food and regulatory measures around food labelling and the marketing of unhealthy food products, show the most promise in cost-effectively contributing to a reduction in chronic disease⁵.

New Zealand is considered by many as a world leader in producing high quality research. However, like most other countries much of this research

focuses on short term outcomes, when research on the long-term effectiveness, sustainability and cost-effectiveness of interventions is what is really needed.

We all have a common desire to live in a country where lives are not cut short nor the quality of life diminished by poor nutrition and physical inactivity. As a sector we now need to decide and agree upon a collective direction to achieve this, a topic which will be discussed at the 2011 Agencies for Nutrition Action Conference, Rethinking our Futures, this May in Auckland.

Julia Lyon
National Coordinator
Agencies for Nutrition Action

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Pacific youth: Promoting a better future



Fono planning group with Hon. Georgina te Heuheu, Minister Pacific Island Affairs

Improving nutrition and physical activity in Pacific youth – and sharing ideas about what works – was the aim of the last year's annual Pacific fono, held in Wellington.

The fono, which was attended by over 300 health providers, researchers and agencies working to reduce obesity in Pacific communities, was opened by Dr Colin Tukuitonga, Chief Executive of the Ministry of Pacific Island Affairs.

Chair of the Fono Planning Group and manager of Pacific Health Service Hutt Valley, Nanai Mua'au, said the fono was designed to highlight the issue of obesity among Pacific youth, and how it is being addressed.

"The goal was to use the fono as a platform to showcase some of the very successful programmes that have been running over the last 12 months"

One of these was the Healthy Porirua Project, which has been working with a number of agencies to improve access to healthy affordable food, particularly in Waitangirua and Cannons Creek, which currently have no supermarket or fruit and vegetable shop.

Project Manager, Cassius Kuresa, who was also co-MC at the fono, said the initial focus of the project was just getting stakeholders to work collaboratively to address issues such as fast food outlet intensification in the area.

"We couldn't work in isolation, so we liaised with the council and other policy makers to raise awareness around the effects those sorts of environmental factors were having on the people of these areas, and that everyone had a role to play.

"Future plans now include the establishment a community market in the area, which was an idea generated from the community".

A highly successful sustainable gardening project, an initiative of St John's Avalon Uniting Church, was also presented at the fono.

Past Healthy Eating Healthy Action Programme Manager for the Hutt Valley District Health Board, Nicholette Pomana, said the project initially saw a vegetable garden established in the church grounds, followed by 18 families of the largely Tongan congregation setting up their own home vegetable gardens.

"They celebrated being able to harvest and cook their own food and learned to improve their diet by trialling new ways of cooking and eating more vegetables."

More families joined the project in the second year, and a greenhouse was added to the church garden to enable seedlings to be propagated.

"There have also been a number of spin-off benefits, such as younger members of the congregation helping the elderly, largely pākehā, members of the congregation with their gardens. They have also been running dance classes and establishing sports teams. Other churches in the Hutt Valley are now looking to St John's for advice on starting their own gardens," says Nicholette.

Mr Mua'au said there's a lot of doom and gloom talk about the levels of obesity among Pacific peoples, but in reality, there are many positives to celebrate.

"For example, Pacific youth are increasingly becoming leaders in encouraging healthy eating and physical activity – they are spreading these messages through their families, churches, communities and sports clubs."

However, he acknowledged that progress can seem slow.

"Sometimes it seems we are taking a step forward and then half a step back. We need to change the behaviour of the whole population, rather than focus on the individual.

"Along with the great community programmes we are seeing, we need changes in legislation. For example, in Victoria, Australia it will soon be mandatory for large fast food outlets to include a calorie count on their menus. We need to look at moves like this in New Zealand, and as the community we need to continue to influence health policy.

"There is also a need to support approaches to reduce the stereotyping around the issues of obesity and nutrition that has a negative impact on the way Pacific people feel and are being perceived. This negative perception tends to stymie a lot of innovative ideas and solutions.

"Having said this, Pacific people must not lose sight of the fact that obesity amongst our young people is an epidemic and we need to look at our own behaviour and make appropriate and necessary changes. It is not easy but can be done."

As well as those talking about local initiatives, speakers at the fono also included Dr Tasileta Teevale, a Doctoral Research Fellow in Pacific health at Auckland University, and Arnell Hinkle visiting Ian Axford Fellow from the United States. The fono was closed with a moving address from the Honourable Georgina te Heuheu, Minister of Pacific Island Affairs.

It is hoped that now, a regional nutrition and physical activity network will be established, to support the workforce to improve the health of Pacific people.

A selection of presentations from the fono can be download at <http://www.ana.org.nz/fono.php>.

New From the Journals



Crunching the numbers: The affordability of nutritious food for New Zealand children

Hopgood T, Asher I, Wall CR, Grant CC, Stewart J, Muimuiheata S, Exeter D.

Nutrition & Dietetics, 2010; 67: 251-257

The aim of this study was to calculate the cost of meals which meet the New Zealand national nutrition guidelines for children as well as New Zealand European and Tongan food preferences. The study was based in Auckland, with the cost of meal ingredients calculated from 14 shops randomly selected from least and most deprived areas. Results showed the average annual cost of food for one child was \$1472 (3-5 year old) to \$4411 per year (13-14 year old). Tongan plans were cheaper than their European equivalents and no difference in price of ingredients was demonstrated between the most and least deprived areas. The authors concluded that providing nutritionally appropriate diets for children required on average 33% of the child related component of New Zealand Governments provisions for low socioeconomic families in 2007. This study adds to the evidence supporting a need to explore new strategies that make children's meals more affordable for low income families.

Fundamental movement skills in children and adolescents: Review of associated health benefits

Lubans D, Morgan P, Cliff D, Barnett L, Okely A.
Sports Medicine, 2010, 40(12).

The development of fundamental movement skills (FMS) in childhood continues to receive considerable attention. This is because the mastery of FMS

has been purported as contributing to children's physical, cognitive and social development and is thought to provide the foundation for an active lifestyle. This systematic review examined the relationship between FMS competency and a range of psychological, physiological, health and behavioural benefits in children and adolescents. Twenty one articles met the inclusion criteria for the review. Authors found strong evidence for a positive association between FMS competency and physical activity in children and adolescents. A positive relationship between FMS and cardio-respiratory fitness and inverse association between FMS competency and weight status was also reported. These findings contribute to increasing evidence supporting the promotion of FMS as an important step in the development of healthy, active children and adolescents.



If you have just completed new research on any aspect of population/ community nutrition or physical we want to hear from you! We are keen to increase sector access and awareness of new research specifically in the context of New Zealand. Please email julia@ana.org.nz if you would like to showcase your research in our next newsletter.

Economic analysis of physical activity interventions

Wu S, Cohen D, Shi U, Pearson M, Sturm R.
American Journal of Preventative Medicine, 2011, 40(2): 149-58

Numerous interventions have been shown to increase physical activity, but have not been ranked by effectiveness or cost. This systematic review included 91 effective interventions promoting physical activity. Cost-effectiveness ratios were calculated as cost per MET-hour¹ gained per day per individual reached. Analysis showed the most cost-effective strategies were for point-of-decision prompts (e.g. signs to prompt stair use), with a median cost of \$0.07/MET-hour/day/person. However these strategies had small effects, adding only 0.2% of minimum US physical activity levels. Although school-based physical activity interventions were more costly (\$0.42/MET-hour/day/person) they generated an average of 16% of recommended physical activity. Initiatives based on creating or enhancing access to places for physical activity and community campaigns were cost effective but limited in number. Individually adapted behaviour change and social support programmes were reported as the least cost-effective, but had the largest effect size, adding 35-43% of recommended physical activity. These results highlight cost effectiveness and effect size are both important considerations when choosing physical activity interventions.

1 MET – an acronym for metabolic equivalent. METs express energy expenditure in multiples that are relative to an individual's resting metabolic rate. One MET represents the rate of oxygen consumption (VO₂) of approximately 3.5mL Oxygen/kg/minute for and average adult sitting quietly. An individual performing an activity of 3 METs has a VO₂ three times higher than that while sitting quietly. Another way to imagine how a MET works is that the energy used from very slow walking (which has a MET of 2.0) increases whole-body energy expenditure by 2.0 times more than when seated still.

Community-based obesity prevention programmes work!

Special Edition of the American Journal of Public Health, 2010, 100(11)

This special edition of the American Journal of Public Health is a must read for anyone interested in learning more about obesity prevention strategies, specifically those using environmental approaches. It evaluates comprehensive, community-based obesity prevention programs in 17 California communities. In these communities residents have teamed up with local leaders to improve their food and physical activity environments. Along with highlighting the many successes of these programmes, the articles also describe the challenges in creating and measuring change. Evidence collected by the Journal adds to a growing body of research indicating that residents take advantage of healthy choices when they are available. And it shows that all communities, even those facing serious economic or health challenges, can reshape their environments.

All of these articles can be accessed freely at www.calendow.org/Article.aspx?id=4686#ajph.

Coming Events

AUSTRALIAN HEALTH PROMOTION ASSOCIATION:

20TH NATIONAL CONFERENCE,

10-13 April 2011, Cairns. Visit www.conferenceco.com.au/AHPA/index.html for further information.

RETHINKING OUR FUTURE, ANA 2011 National Conference,

3-4 May 2011, Rendezvous Hotel, Auckland.
Visit www.ana.org.nz for further information.

NATIONAL NUTRITION WEEK,

9-14 May 2011, New Zealand. The theme will be 'Just Cook'. Visit www.nutritionfoundation.org.nz for more information.

INTERNATIONAL SOCIETY FOR BEHAVIOURAL NUTRITION AND PHYSICAL ACTIVITY ANNUAL CONFERENCE,

15-18 June 2011, Melbourne Australia. Visit www.isbnpa2011.org for more information.

2011 SATELLITE MEETING OF THE INTERNATIONAL SOCIETY FOR BEHAVIORAL NUTRITION AND PHYSICAL ACTIVITY,

21-24 June 2011, Queenstown. More information will be posted shortly at www.isbnpa2011.org.

THE 18TH INTERNATIONAL SYMPOSIUM OF ADAPTED PHYSICAL ACTIVITY,

4-8 July 2011, Christchurch. For more information visit www.isapa2011.com/index.shtml.

DIETITIANS NZ CONFERENCE,

21-24 August 2011, Nelson. For more information visit www.dietitians.org.nz.

PUBLIC HEALTH ASSOCIATION CONFERENCE 2011,

31 August – 2 September 2011, University of Canterbury, Christchurch. For more information visit www.pha.org.nz

NZ RECREATION ASSOCIATION ANNUAL CONFERENCE

16-18 November 2011, Dunedin

Information on the conference will be posted at www.nzrecreation.org.nz as it becomes available.

NUTRITION SOCIETY ANNUAL CONFERENCE,

29 November – 2 December 2011, Rydges Lakeside Resort, Queenstown. For more information see www.events4you.co.nz/nutr2011.html

What's New

Stay up to date with "what's new" by visiting www.ana.org.nz/whatsnew.php. We add news weekly. Here is a sample of our recent items.

FINAL REPORT OF THE REVIEW OF FOOD LABELLING LAW AND POLICY RELEASED

This independent review commissioned by the Australian and New Zealand Food Regulations Ministerial Council was formally presented on the 28 January 2011. The report proposes a number of positive recommendations including the implementation of a traffic light nutrition labelling system and a ban on unhealthy foods carrying claims about health benefits. The next challenge will be implementing the recommendations.

The report is available at www.foodlabellingreview.gov.au/internet/foodlabelling/publishing.nsf/content/labelling-logic.

POSITION STATEMENT: EXERCISE AND TYPE 2 DIABETES

The American College of Sports Medicine and the American Diabetes Association have released a joint position statement 'Exercise and Type 2 Diabetes'. This statement discusses the benefits of physical training, along with recommendations for varying activities, physical activity associated blood glucose management, diabetes prevention, gestational diabetes, and safe and effective practices for physical activity with diabetes related complications.

To download a copy of the report visit http://journals.lww.com/acsm-msse/Fulltext/2010/12000/Exercise_and_Type_2_Diabetes__American_College_of.18.aspx

WHY THE HAPPY MEAL IS ALREADY ILLEGAL

This article written by American public health lawyer, Michele Simon debates the legal implications of marketing to children. It argues that all marketing to children is deceptive and unfair because children do not have the capacity to understand that they are being marketed to. In most countries advertising that is deceptive and unfair is prohibited by law. For this reason Michele argues that marketing to children is illegal. In New Zealand deceptive and unfair trading practices are prohibited under the Fair Trading Act 1986.

To download a copy of this article visit www.appetiteforprofit.com/2011/01/27/why-the-happy-meal-is-already-illegal/.

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