



# Policies for tackling obesity and creating healthier food environments

Scorecard and  
recommended actions  
for the **Victorian  
Government**

October 2022

[www.foodpolicyindex.org.au](http://www.foodpolicyindex.org.au)

VIC

## **Policies for tackling obesity and creating healthier food environments: scorecard and priority recommendations for the Victorian Government, October 2022.**

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The Food-EPI Australia initiative forms part of INFORMAS (International Network for Food and Obesity / NCDs Research, Monitoring, Action and Support), a global network focused on monitoring and benchmarking the healthiness of food environments globally.

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For more details of the Food-EPI Australia initiative go to:  
[www.foodpolicyindex.org.au](http://www.foodpolicyindex.org.au)

## Executive summary



Unhealthy diets and obesity are leading contributors to poor health in Australia.

A comprehensive government response is needed to improve population diets and create healthier food environments.

- A whole-of-government multi-sectoral approach is needed, driven by strong leadership.
- A coherent policy response needs to result in substantial reform of food systems, address food security, improve equity and consider environmental sustainability.
- The Food-EPI Australia initiative, first developed and implemented in 2017, aims to benchmark Australian governments (Commonwealth and States / Territories) on their implementation of globally recommended policies for improving population diets and creating healthier food environments.
- This report presents results from the second full assessment of Australian governments.
- The project team worked closely with government officials to document current policy actions (up to 30 June 2021) in each jurisdiction, across over 50 policy areas. The extent of implementation in each policy area was assessed for each jurisdiction, with reference to international best practice benchmarks. Policy recommendations were then developed for each jurisdiction, prioritised based on their relative importance and feasibility.
- **Eighty-four experts from 37 organisations participated in the assessment process** and the prioritisation of recommendations.

## Victorian (VIC) Government

### Areas of good progress



#### Support and resources

There is a comprehensive policy suite, implementation support tools and training systems to help organisations in a range of settings to provide and promote healthy foods and meals



#### Healthy food in health services

Strong commitment to healthy food procurement and provision in health services with the *Healthy Choices: policy directive*, including detailed monitoring and reporting requirements



#### Governance

Independent statutory health promotion agency (*VicHealth*) in place that includes a focus on improving population nutrition, and demonstrated action to improve the healthiness and equity of food systems



#### Health plans/strategies

Release of *Healthy kids, healthy futures* (October 2021) – the Victorian Government's five-year action plan to strengthen coordination for implementation of strategies to support children to be healthy, active and well

## Top 3



### Priority policy recommendations for VIC (2022-2025)

1

**Restrict all advertising for unhealthy food and beverages** (and related brands) in publicly-owned or managed settings, including public transport infrastructure, public spaces, and within 500m of schools

2

**Increase investment in preventive health**, including the capacity (number of staff and their capabilities) of the government to undertake actions related to health promotion and public health nutrition, with increased focus on collaboration and capacity building across departments and agencies

3

**Amend the planning framework to make health and wellbeing an explicit priority** in state planning, as a way to facilitate local governments limiting the placement / relative density of unhealthy food outlets while supporting healthy food outlets

These actions are recommended as part of a comprehensive and coherent policy response.

# Unhealthy diets and obesity are a public health crisis in Australia

- Unhealthy diets and obesity are leading contributors to poor health in Australia, and have significant impacts on individuals, communities, the health-care system and the economy.<sup>1</sup>
- Almost 2 out of 3 (63%) Australian adults, and 1 in 4 (25%) Australian children are overweight or obese.<sup>2</sup> Few people in Australia consume a healthy diet consistent with the Australian Dietary Guidelines.<sup>3</sup>
- There is widespread recognition that unhealthy diets and obesity are driven by food environments in which unhealthy foods and drinks are readily available, heavily promoted, and often relatively cheap.<sup>4</sup>

## Comprehensive government policy action is needed to improve population diets and create healthier food environments

There is expert consensus globally on the range of policy actions that are required to address unhealthy diets and obesity.<sup>5</sup>

- A comprehensive policy response needs to result in substantial reform of food systems, and incorporate measures to address food security, improve equity and consider environmental sustainability.
- A coherent whole-of-government approach is needed, driven by strong leadership, and including action in the areas of health, education, finance, sport and recreation, and several other sectors. Due to inherent conflicts of interest, policy development processes need to be free from food industry influence.
- While the COVID-19 pandemic has highlighted the importance of co-ordinated preventive health action, it has also diverted resources away from efforts to address key drivers of chronic disease.
- In Australia, the **National Preventive Health Strategy** (2021-2030) and the **National Obesity Strategy** (2022-2032) provide clear frameworks for action. However, there is currently a lack of comprehensive action and coherence across jurisdictions.



What's needed now is a **strong focus on implementation**

<sup>1</sup> Australian Institute of Health and Welfare 2021. Australian Burden of Disease Study (2018); Colagiuri et al. MJA 2010

<sup>2</sup> Australian Bureau of Statistics 2018. Overweight and obesity, Australia

<sup>3</sup> Australian Bureau of Statistics. 4364.0.55.007 – Australian Health Survey: Nutrition First Results – Foods and Nutrients, 2011-12: Discretionary foods Australian Government; 2015

<sup>4</sup> Swinburn et al. Lancet 2011

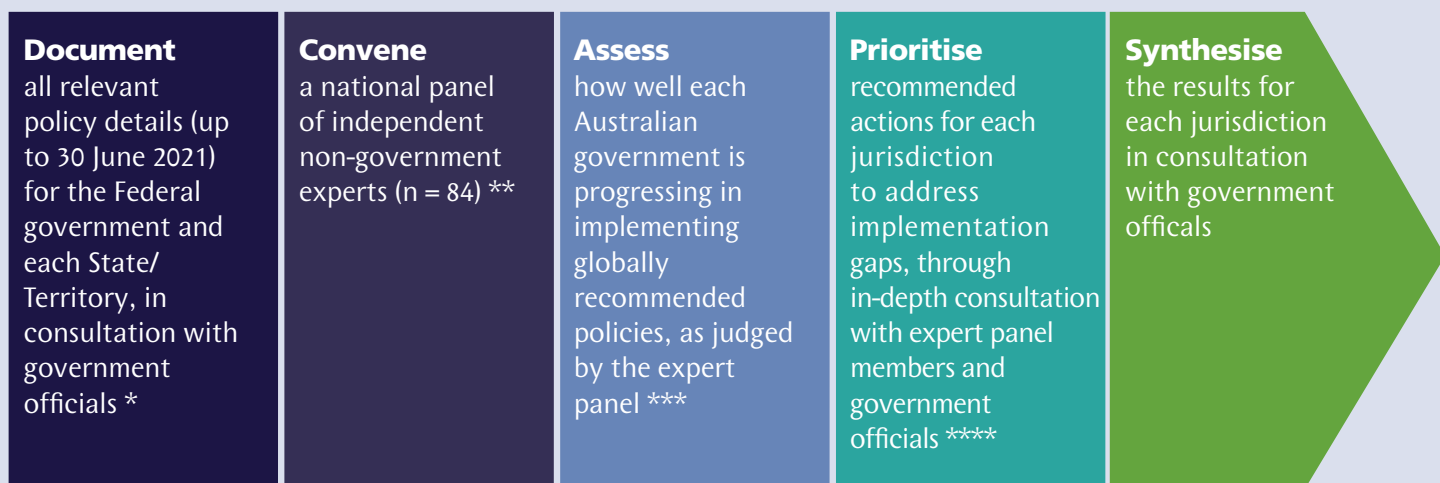
<sup>5</sup> Swinburn et al. Lancet 2019

# Food Policy Index (Food-EPI) Australia

- The Food Policy Index (Food-EPI) Australia initiative is an ongoing process to benchmark Australian governments (Commonwealth and States / Territories) on their progress in implementing globally recommended policies to improve population diets and address obesity. The goal of the initiative is help facilitate implementation of a comprehensive and cohesive set of actions.
- The Food-EPI Australia initiative, first implemented in Australia in 2017, is based on the Food-EPI tool that was developed by INFORMAS ([www.informas.org](http://www.informas.org)) and applied in 25+ countries.
- The Food-EPI tool covers key globally recommended policies, including: **1) policy actions** targeting specific aspects of food environments (such as food composition, labelling, promotion, prices and provision) that have been shown to have an important impact on population diets and obesity, and **2) infrastructure support** (including leadership, governance, monitoring and funding) that helps facilitate effective policy implementation.
- In each policy area, the extent of government implementation is assessed against best practice benchmarks, with reference to international and national examples of good practice (see Appendix).



## Process for assessing extent of policy implementation in Australia



\* Detailed summaries of each government's policy details are available at [www.foodpolicyindex.org.au](http://www.foodpolicyindex.org.au)

\*\* Panel members included academics, nutritionists, and senior representatives from health NGOs and community groups with expertise in population health, nutrition and / or obesity prevention

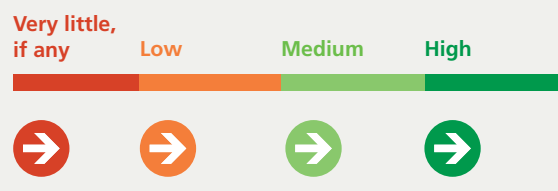
\*\*\* Assessment was conducted with reference to global best practice statements, as identified by INFORMAS, taking into account policy characteristics and the extent of policy implementation. The Commonwealth Government and each State/Territory were assessed separately; however, in some policy areas, policy development involves collaboration between the Commonwealth Government and State/Territory governments, and implementation of national guidance and policy is at the discretion of each jurisdiction

\*\*\*\* As part of the prioritisation process, priority recommendations for action in the short-term (next three years) were identified for each jurisdiction, taking into account the relative importance and feasibility of each proposed action, as part of a comprehensive and coherent policy response

# Scorecard for Victoria 2022



## Assessment of level of implementation of key policies for tackling obesity and creating healthier food environments



Category	Policy	Implementation Level
Food labelling	Menu labelling	High
Food promotion	Restrict exposure of children to promotion of unhealthy food in public settings	Low
	Restrict the promotion of unhealthy foods related to sport	Low
Food provision	Healthy food provision in schools	Medium
	Healthy food provision in health services (visitors and staff)	Medium
	Healthy food provision in care settings (resident/in-patient food provision)	Medium
	Healthy food provision in public sector workplaces	Medium
	Healthy food provision in community settings	Medium
	Support and training systems for public sector settings	High
Food retail	Planning policies: restrict unhealthy food retail outlets	Very little, if any
	Planning policies: support healthy food retail outlets	Very little, if any
	Remote retail store availability of healthy and unhealthy food	Low
	Availability of healthy foods in food service outlets	Medium
	Restriction of marketing of unhealthy food in retail outlets	Very little, if any
Leadership	Strong, visible, political support for population nutrition	Low
	Government strategy and related implementation plan for addressing nutrition and obesity	High
Governance	Restricting commercial influence on policy development	Medium
	Transparency in the development of food and nutrition policies	Medium
	Assessing the potential health impacts of all policies	Low
	Government workforce to support public health nutrition	Low
	Independent health promotion agency	High
Monitoring & intelligence	Monitoring population nutrition intake	Medium
	Monitoring population body weight	Medium
	Evaluation of major nutrition-related programs and policies	Low
	Research funding for obesity and NCD prevention	Medium
Support for communities	Coordinated support for community-based interventions	High
	Social marketing campaigns	Low
	Food and nutrition in education curricula	Medium

# Recommended actions for the Victorian Government

The following set of actions are recommended for the Victorian Government as part of a comprehensive and coherent strategy to improve population diets and create healthy food environments. Priority recommendations for action in the short-term (2022-2025) are highlighted.

Policy area	Recommended policy action
Healthy food marketing	Restrict all advertising for unhealthy food and beverages (and related brands) in publicly-owned or managed settings, including public transport infrastructure, public spaces, and within 500m of schools
	Require all organisations, such as community groups and sports clubs, that receive funding from the Victorian Government to remove all promotion and sponsorship related to unhealthy food and beverages (and related brands) as a condition of receiving funding, using the <i>VicHealth Harmful Industry Relationships Funding and Procurement Policy</i> as a model
Healthy food procurement and provision in key settings	Improve healthy and environmentally sustainable food provision in schools by updating the <i>School Canteens and Other School Food Services Policy</i> , expanding its application to all schools (including government, independent and Catholic schools), and extending reporting mechanisms, incentives for compliance and support systems
	Support and incentivise the implementation of the new <i>Healthy choices: policy directive</i> in all Victorian hospitals and health care facilities, including extending the policy directive to externally-managed retail outlets
	Restrict the provision and promotion of unhealthy foods and beverages in government-owned or managed sport and recreation venues, whilst supporting provision of healthy options
	Support and effectively monitor compliance with food provision guidelines in the early childhood education and care (ECEC) services
	Demonstrate long-term commitment and increased support for the <i>Achievement Program</i> and the <i>Healthy Eating Advisory Service</i> , which support a wide range of public and private-sector settings to implement healthy food policies
Healthy food retail	Amend the planning framework to make health and wellbeing an explicit priority in state planning, as a way to facilitate local governments limiting the placement / relative density of unhealthy food outlets while supporting healthy food outlets
	Investigate policies to restrict the marketing of unhealthy food in retail outlets (such as supermarkets), including requirements for healthy checkouts and restrictions on temporary price reductions / promotions on unhealthy foods and drinks, coupled with policies to increase in-store marketing of healthy foods and drinks
	Develop guidelines and offer co-ordinated support to local governments on ways to improve the availability of healthy foods and decrease the availability and promotion of unhealthy foods in food retail outlets (including restaurants, take-away outlets etc)

# Recommended actions for the Victorian Government

Policy area	Recommended policy action
<b>Leadership</b>	Strengthen whole-of-government co-ordination for implementation of existing strategies for improving population diets and addressing obesity, including representation and accountability from each department, and long-term funding commitment to achieve sustained outcomes
<b>Governance and workforce</b>	Implement a health co-benefits approach to policy development and proposal processes across government, including explicit consideration of the impacts of policies on population nutrition and health
	Increase investment in preventive health, including the capacity (number of staff and their capabilities) of the government to undertake actions related to health promotion and public health nutrition, with increased focus on collaboration and capacity building across all government department and agencies
<b>Monitoring, evaluation and learning</b>	Support ongoing monitoring and review of the healthiness of food environments, including the exposure of children to marketing of unhealthy foods (and related brands), and the price and affordability of healthy and unhealthy foods
	Include robust evaluation (including nutrition-related outcomes) in the design and routine review of nutrition-related programs and policies, with results made publicly available
	Ensure population-wide surveillance of nutrition and related health outcomes, including by introducing regular measuring of height and weight at key stages of children and young people's development, following best practice protocols (including 'opt-out' consent), and improving access to data related to pre-school children
<b>Support for communities</b>	Commit to ongoing, long-term support for social marketing campaigns, developed based on best-practice principles, as part of broader efforts to improve population nutrition
	Support the provision of comprehensive guidance and resources to educators for the inclusion of food and nutrition curricula in early childhood education and care (ECEC) services and all school years in a way that supports existing teaching priorities



## Appendix: Examples of good practice

Domain	Policy area	International example of good practice (as identified by INFORMAS)	Leading State / Territory in Australia (as per assessments by Expert Panel as part of this initiative)
Food labelling	Menu labelling	<b>South Korea:</b> All fast-food outlets required to display detailed nutrition information (incl. energy, total sugars, protein, saturated fat and sodium) on menus	<b>ACT/NSW/QLD/SA/VIC:</b> Large fast-food chains required to display average energy content on menus and overall average daily energy intake
Food promotion	Restrict exposure of children to promotion of unhealthy food in public settings	<b>Chile:</b> Restricts advertising of unhealthy foods directed to children (under the age of 14 years) in various public settings	<b>ACT/WA:</b> ACT restricts the advertising of unhealthy food on government-run buses. WA restricts the advertisement of unhealthy food and beverages in health services and schools
	Restrict the promotion of unhealthy foods related to sport	<b>Amsterdam:</b> Sponsorship of sports events with >25% young people in attendance is not permitted by unhealthy food or drink manufacturers	<b>VIC/WA:</b> <i>VicHealth</i> and <i>Healthway</i> generally do not engage in any funding agreements with organisations with co-sponsors that promote unhealthy brands or messages
Food provision	Healthy food provision in schools	<b>Chile:</b> Regulatory norms define 'high' limits for energy, saturated fat, sugar and sodium content. Foods and beverages considered as 'high' in particular nutrients are prohibited from being sold in schools	<b>NSW/WA:</b> Six states and territories have implemented mandatory standards, which are either based on the national voluntary guidelines or nutrient and food criteria defined by the state. WA and NSW routinely monitor and report implementation and compliance
	Healthy food provision in health services (visitors and staff)	<b>Wales:</b> Vending machines dispensing chips, confectionery and sugary drinks are prohibited in National Health Service hospitals	<b>NSW/WA:</b> Most states/territories have implemented a policy regarding healthy food provision in retail outlets at health care facilities and/or are reviewing and updating current policies. NSW and WA conduct comprehensive monitoring and reporting on compliance
	Healthy food provision in care settings (resident/in-patient food provision)	<b>New York City, USA:</b> Mandatory nutritional standards for all food purchased/sold by city agencies (hospitals, prisons, aged care, health facilities)	<b>ACT/NSW/NT/QLD/SA/VIC/WA:</b> Nutritional standards must be met for accreditation in health services
	Healthy food provision in public sector workplaces	<b>Brazil:</b> Procurement guidelines for food served or sold for purchase in the Ministry of Health and its entities are based on the Food Guide for the Brazilian population	<b>ACT/VIC:</b> Policies and commitments to improve healthy food choices in all government workplaces and facilities
	Healthy food provision in community settings	<b>The Netherlands:</b> The Guidelines for Healthier Canteens covers canteens at schools, sports clubs and workplaces and provides guidelines for the level of a full range of food and drink being offered, together with the canteen's general display layout	<b>SA/VIC:</b> Policies, commitments, and funding to improve healthy food choices in community settings, including food relief
	Support and training systems for public sector settings	<b>Japan:</b> Mandatory oversight and monitoring by dietitian/nutritionist (incl. menu development) for all government facilities providing >250 meals/day	<b>VIC:</b> <i>Healthy Eating Advisory Service (HEAS)</i> provides a wide range of resources to support settings such as childcare centres, schools, health services, and sports centres to provide healthy foods and drinks in line with Victorian Government policies and guidelines

## Appendix: Examples of good practice

Domain	Policy area	International example of good practice (as identified by INFORMAS)	Leading State / Territory in Australia (as per assessments by Expert Panel as part of this initiative)
Food retail	Planning policies: unhealthy food retail outlets	<b>South Korea:</b> ‘Green Food Zones’ around schools (200 metre radius) in which sales of ‘unhealthy’ foods are prohibited	<b>QLD/TAS:</b> Incorporates health as a key consideration as part of the Planning Act
	Planning policies: healthy food retail outlets	<b>USA:</b> Provision of grants for states to provide financial/other types of assistance to attract healthier retail outlets to underserved areas	<b>ACT/NSW/QLD/SA:</b> Provides detailed information and resources for local government on ways to promote healthy food choices through the built environment and encourage outlets that sell healthy food
	Remote retail store availability of healthy and unhealthy food	<b>Canada:</b> A subsidy programme helps provide populations in isolated communities with improved access to perishable, nutritious food. Eligibility is based on isolation factors and focuses on communities that lack year-round surface access	<b>QLD:</b> 18-month pilot project partnering with three Aboriginal and Torres Strait Islander Shire Councils to reduce sugary drink consumption underway. <i>Healthy Stores Project 2021-2024</i> works with communities and other sectors to improve food security, including a focus on improving in-store environments to support healthy food and drink behaviours
	Availability of foods in food service outlets	<b>Singapore:</b> Government partnership (‘Healthier Hawker’ program) with selected food vendors to improve healthiness of take-away food	<b>ACT/QLD/SA/VIC:</b> Programs and initiatives in place that provide resources and support to improve the nutritional quality of foods
	Restriction of marketing of unhealthy food in retail outlets	<b>UK:</b> Legislation introduced in 2020 (applicable to in-store and online retailers selling food and drink) restricts the promotion of pre-packed products that are high in fat, sugar and salt, for a specified list of food product categories, by location and volume price. Implementation currently delayed.	<b>QLD:</b> <i>Healthy Stores Project 2021-2024</i> works with communities and other sectors to improve food security, including a focus on improving in-store environments to support healthy food and drink behaviours
Leadership	Strong, visible, political support for population nutrition	<b>New York City, USA:</b> From 2002-2013, Mayor (Michael Bloomberg) showed strong political leadership in introducing landmark food policies, including restrictions on trans-fat and portion size restrictions on sugary-drinks	<b>QLD/WA:</b> Commitments from the WA Premier and QLD Health minister to improve food environments
	Comprehensive implementation plan linked to state/national needs	<b>Ireland:</b> ‘A Healthy Weight for Ireland, the Obesity Policy and Action Plan 2016-2025’ (OPAP) prescribes ‘Ten Steps Forward’ that should be taken to reverse obesity trends, prevent health complications and reduce the overall burden	<b>ACT/QLD/SA/VIC/WA:</b> State-wide health and wellbeing plans, prevention strategies and action plans with objectives to improve healthy food environments, increase healthy eating and address overweight and obesity
Governance	Restricting commercial influence on policy development	<b>USA:</b> Mandatory and publicly accessible lobby registers – including extensive reporting of nature of lobbying activities	<b>ALL:</b> Political donations to electoral candidates need to be publicly disclosed, with varying threshold amounts, and lodgement periods
	Transparency in the development of food and nutrition policies	<b>Canada:</b> Health Canada publishes a table of all correspondence, and all meetings with stakeholders with the intent to inform the development of policies, guidance or regulation related to healthy eating initiatives.	<b>ACT/NSW/QLD/SA/TAS/VIC/WA:</b> Most governments across Australia have open data policies, frameworks for information access, and policies and procedures that ensure transparency to varying degrees

## Appendix: Examples of good practice

Domain	Policy area	International example of good practice (as identified by INFORMAS)	Leading State / Territory in Australia (as per assessments by Expert Panel as part of this initiative)
Governance (continued)	Assessing the potential health impacts of all policies	<b>Slovenia:</b> In 2003, conducted a national health impact assessment related to agricultural policy that included the analysis of Slovenian data for key health-related indicators	<b>SA:</b> In 2007, a <i>Health in All Policies</i> approach was implemented by the government, supported by central governance and accountability mechanisms, an overarching framework with a program of work across government and a commitment to work collaboratively across agencies
	Government workforce to support public health nutrition	Not available	<b>NSW:</b> In 2020, an estimated 70 FTE worked in roles to support healthy communities of which many programs had a healthy eating component (8.0 of the 70 FTE were in Food Policy)
	Independent health promotion agency	<b>Thailand:</b> The Thai Health Promotion Foundation (ThaiHealth) is an autonomous government agency established by the Health Promotion Foundation Act as a dedicated health promotion agency.	<b>QLD/SA/VIC/WA:</b> <i>Health and Wellbeing Queensland, Wellbeing SA, VicHealth</i> and <i>Healthway</i> are independent health promotion agencies
Monitoring & intelligence	Monitoring population nutrition intake	<b>USA:</b> National Health and Nutrition Examination Survey (NHANES), conducted annually, provides detailed national information on health status, disease history and nutritional intake of adults and children	<b>ACT/NSW/SA/VIC/WA:</b> Annual data collected on dietary habits and key food group intakes of adult and children
	Monitoring population body weight	<b>UK:</b> National Child Measurement Program for children's BMI, assessing children ages 4-6 and 10-11	<b>NSW:</b> Routine monitoring of height and weight measures is conducted for all children (0-17 years) who attend a NSW Health facility. Regular surveys of self-reported BMI from adults and children.
	Evaluation of major nutrition-related programs and policies	<b>USA:</b> The National Institutes for Health (NIH) provides dedicated funding for research that evaluates new policies/ programs expected to influence obesity related behaviours	<b>NSW:</b> Evaluations of large and significant NSW Government programs conducted. Guidelines and Toolkits provide guidance and resources to undertake program evaluations
	Research funding for obesity and NCD prevention	<b>Ireland:</b> The Food Institutional Research Measure (FIRM) is the primary national funding mechanism for food research. Beneficiaries are required to widely disseminate the results of their research	<b>NSW/WA:</b> Several funding programs that support public health nutrition including investments in research assets, priority research centres, competitive funding schemes, collaborative research (e.g., The Australian Prevention Partnership Centre), core funding for research organisations and commissioned research and evaluation
Support for communities	Coordinated support for community-based interventions	<b>Australia:</b> Previous National Partnership Agreement on Preventive Health (now defunct) provided State and Territory level support for initiatives aimed at obesity and NCD prevention	<b>VIC:</b> Multiple targeted strategies, policies and initiatives at state and local level designed to create healthier food environments (schools, childcare centres, workplaces, food outlets, sporting clubs, businesses and local government)
	Social marketing campaigns	Multiple international examples	<b>WA:</b> Funds several obesity and NCD prevention social marketing campaigns, online and community programs, including <i>LiveLighter</i> ® that has now been adopted in multiple states / territories
	Food and nutrition in education curricula	<b>UK:</b> National framework for core food competency skills and knowledge in children ages 5-16 years	<b>ACT/NSW/QLD/TAS/WA:</b> Ongoing support and provision of resources to educators for the inclusion of food and nutrition in school curricula

