

## **DAA STATEMENT:**

# Confusion over recent blog post on DAA and APDs by David Gillespie

It's good to know so many people are concerned about the problem of obesity in Australia, as this is a crucial issue. But it's important that individuals, groups and organisations work together to tackle this tragic problem. We need to all be working towards the common goal of reducing rates of obesity and improving the health and wellbeing of Australians.

## **Accredited Practising Dietitians: THE experts in nutrition**

Accredited Practising Dietitians (APDs) are university qualified in nutrition and dietetics. Training involves a minimum four year Bachelor degree or a Masters in Nutrition and Dietetics, following a science-based undergraduate degree. APDs must engage in an ongoing continuing professional development program, and comply with DAA's guidelines for best practice.

There is a lot of conflicting advice available about diet and nutrition (often provided by people with no nutrition qualifications) – and this is confusing the Australian public. It is intriguing that a lawyer is providing dietary advice to Australians. An APD would not dream of providing advice on legal matters, so why would a lawyer discuss nutrition? When it comes to food and nutrition, Accredited Practising Dietitians (APDs) are the experts.

#### **DAA Corporate Partnerships: The Facts**

Some people have concerns about DAA's Corporate Partnerships. We understand those concerns, so have put in place careful safeguards to manage our Corporate Partnerships and maintain our independence. We are committed to successful partnerships through:

- Carefully managing our Corporate Partnerships (including openly discussing issues)
- Following sound and transparent policies and procedures
- Making public our Corporate Partners
- Maintaining our independence.

DAA develops nutrition information and media releases independently, based on scientific evidence, and our current dietary guidelines and national recommendations. Our partnerships allow us to raise and openly discuss issues with our partners; they listen to us and we always maintain independent views. We always ensure that corporate support for projects, workshops or other activities is declared.

DAA has Corporate Partnerships to help us improve the health of Australians. A clear element of that relationship (understood by all parties) is that we have the right, even obligation, to speak our mind and we have very frank discussions with our Corporate Partners.

By working together, DAA can positively influence many aspects of our partners work – project goals and plans, nutrition information for the public, recipe formulations, community service announcements and advertising. Our job is to get all Australians eating better. We reach and influence more people by working through our Corporate Partnerships.

#### Sugar and obesity

Dr Alan Barclay's research found fructose consumption has decreased in Australia – which is a good thing, and DAA would like to see this trend continue. But DAA believes sugar is not the cause of Australia's obesity epidemic, as obesity isn't <u>caused</u> by any one food alone. We gain weight when we eat more energy, or kilojoules, than we use up through exercise or activity. Eating fewer kilojoules, watching portion sizes and moving more can all help people achieve or maintain a healthy weight.

And the issue of obesity is much broader than just sugar – we will only get results by addressing the many factors that are contributing to the issue of obesity in Australia, not focusing on only one. Excessive intake of any high-kilojoule substance may well promote weight gain, but it is naive and counterproductive to look for 'demons' and simplistic solutions.

DAA is calling for a comprehensive, coordinated and evidence-based approach to tackling obesity. This includes recognition of obesity as a chronic disease, dietary management of obesity through Medicare, funding to help struggling families feed their children properly, regulated and more responsible food marketing, improvements in the food supply, and a host of other actions, as outlined in the Association's Obesity Strategy.