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23 September 2022

s 9(2)(a)

By email: **s 9(2)(a)**
Ref: H2022011194

Tēnā koe **s 9(2)(a)**

Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) to Manatū Hauora (Ministry of Health) on 26 August 2022 for information regarding the removal of 'calcium-fortified milk alternative' in the Eating and Activities Guideline. You requested:

"In the Eating and Activity Series Key Statements document from May 2014 (page 6) the draft nutrition statement stated: 'Enjoy a variety of nutritious foods every day including [...] some low fat milk products and/or calcium-fortified milk alternative.' However, in the final publication this sentence was changed to 'some milk and milk products, mostly low and reduced fat'.

1. Can I please have all documents and recordings (ie: emails, notes, meeting minutes and summary documents) in relation to the removal of 'calcium-fortified milk alternative' from the sentence 'some milk and milk products, mostly low and reduced fat' from Eating Statement 1 of the MOH Eating and Activity Guidelines for New Zealand Adults (published October 2015, updated in 2020)."

Documents identified within scope of your request are appended to this letter. These include an email trail from July 2014 and the Draft Eating and Activity Statements. These documents are itemised in Appendix 1 and have been released to you in full.

I trust this information fulfils your request. Under section 28(3) of the Act, you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Manatū Hauora website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Ngā mihi nui



Jane Chambers
Group Manager
Public Health Policy and Regulation
Public Health Agency
Ministry of Health

Appendix 1: List of documents for release

| # | Date | Document details | Decision on release |
|----|-----------|---|---------------------|
| 1 | June 2014 | Email - Minutes of the Second Meeting of the Technical Advisory Group for the Eating and Activity Guidelines | Released in full. |
| 1a | | Email Attachment - Minutes of the Second Meeting of the Technical Advisory Group for the Eating and Activity Guidelines | |
| 2 | July 2014 | Draft Eating and Activity Statements as at 17 July 2014 | |



Document Profile

Nutrition & Physical Activity Filing

| | | | |
|---------------------------|---|-----------------------|--|
| Status: | Final | Drawer: | Food and Nutrition Guidelines |
| Date: | 11/07/2014 | Folder: | New GL Model\External Technical Group\TAG Meeting Jun 2014 |
| Title: | Minutes of the Second Meeting of the Technical Advisory Group for the Eating and Activity Guidelines - 11 June 2014 | File Location: | |
| Author: | Louise McIntyre | Unit: | |
| Document Type: | Email | Maintainer(s): | PHP-PH-Nutrition and Physical Activity Bridie Doyle |
| Summary: | | | |
| Knowledge Content: | | | |

Hi All

Please find attached a copy of the draft minutes from our last TAG meeting on 11 June 2014. Please also excuse the delay in getting these to you. It has been longer than the 10 days following the meeting as outlined in the Terms of Reference.

Please let us know as to whether these minutes are an accurate reflection of the key points discussed and the decisions reached. We would appreciate any comments by 8 August 2014 at the latest.

As discussed at the meeting, the plan is to hold a video-conference to further discuss any issues re the statement with a view to finalising them. We don't have a date for this yet but will shortly send out a doodle-poll to find a suitable time for as many people as possible. As we need to progress the statements to meet our current end of year publication deadline, we hope to hold this meeting sometime in August if that is possible.

Regards

Louise McIntyre

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----- Document: Minutes of the Second Meeting of the Technical Advisory Group for the Eating and Activity Guidelines - 11 June 2014, forwarded by Louise McIntyre on 11/07/2014 10:54 am -----



- Microsoft_Word_Document12.doc

Refer to Document 1A

Minutes of the Second Meeting of the Technical Advisory Group for the Eating and Activity Guidelines

11 June 2014

09.30 to 16.00

Held in room G05 – Ground Floor North
Ministry of Health
133 Molesworth Street
WELLINGTON

In Attendance

Members of the TAG

Professor Jim Mann (Chair)
Delvina Gorton
Dr Clare Wall
Dr Ofa Dewes
Dr Pamela von Hurst
Dr Scott Duncan
Zirsha Wharemate

| | |
|-----------------------------|---------------------------------|
| Louise McIntyre | Secretariat, Ministry of Health |
| Martin Dutton | Secretariat, Ministry of Health |
| Dr Harriette Carr (pm only) | Ministry of Health |
| Elizabeth Aitken | Ministry of Health |
| Laree Taula | Ministry of Health contractor |
| Maria Turley | Ministry of Health |
| Dr Mary-Ann Carter | Health Promotion Agency |

Apologies

Dr Sandy Mandic
Professor Murray Skeaff
Dr Darren Hunt

Welcome (Agenda item 2)

Zirsha was welcomed as the newest TAG member.

Introductions

The group introduced themselves, including where they work and what their role is.

Confidentiality and conflicts of interest (Agenda item 3)

The Chair noted that the Terms of Reference includes a confidentiality clause and that all discussions held at the meeting be in confidence. TAG members were also asked to update the conflict of interest register circulated during the meeting.

Update since last TAG meeting (Agenda item 4)

The plan for the day and a brief overview of what has happened since the last TAG meeting was summarised. This update included:

TAG #2 – 11 June 2014
Minutes – for attendees approval

- Change to planned publication date of core paper and webpage
 - original date of August 2014 now pushed out to tentative date of 1 December 2014, following announcement of 20 September 2014 election date.
- New communications contractor (short term)
 - to support communication with the sector and media regarding the Eating and Activity Guidelines Series (EAGS).
- Webpage redevelopment
 - changes to Ministry's Guidelines webpage for practitioners to incorporate information, documents and key links related to EAGS.
- Format and design of core paper
 - provider to design and format core paper has been selected
 - core paper aims to be easy to read, more visual with infographics, pictures, and diagrams as well as having an easy to print format.
- Guidelines statements
 - following November's TAG meeting the nutrition group provided further email feedback on eating guidelines
 - both eating and activity statements then underwent a limited communications review by Health Promotion Agency, limited stakeholder consultation and consumer focus group testing
 - statements for discussion were revised based on consideration of above feedback.

The TAG was informed that the outcome sought for the day was to finalise the statements and agree on the evidence base to underpin them. (See Appendix 1 for the statements revised as a result of this 2nd TAG meeting)

Feedback on Statements (Agenda item 5)

Limited stakeholder consultation

Twenty three external stakeholder organisations and nine internal Ministry teams were invited to comment on the draft eating and activity statements. External stakeholders included health practitioner groups, dietitians, physical activity specialists, community health providers, the food industry and others. Twenty submissions were received in total.

The key feedback report was distributed as part of the pre-meeting reading. The main feedback points from stakeholders were that:

- most generally liked the statements
- most wanted them to be in plain English with less technical language
- some wanted a more multicultural focus
- some wanted an overarching statement for eating and activity statements
- some wanted the statements to contain quantified information, for example, on amount of food and duration of activities being recommended
- some had different views on recommendations for total fat and/or saturated fat, and/or grains and/or salt. Some wanted more specific advice on reducing processed food.

Discussion

The TAG said it was important to know if:

- the comments came from one person/organisation, or several, in order to know how much weighting to give the comments
- The group was told that this information was in the feedback report.

Consumer focus group testing

The consumer focus group testing of the draft eating and activity statements was undertaken by Litmus Ltd for the Ministry. The testing involved four focus groups with adult New Zealanders who identify as New Zealand European, Māori, Pacific and South Asian.

A copy of the key findings report was distributed as part of the pre-meeting reading. The main feedback points were that consumers:

- were generally familiar with the eating statements and thought they were largely achievable and accessible. The exception was statement 2 ('Eat a variety of foods every day including...'), which consumers thought sounded expensive and time consuming to do
- were less familiar with the activity statements and thought they were written for a technical or scientific audience
- thought statements that included specific quantified advice were most effective in encouraging people to consider how the statement applied to them
- preferred the use of plain English rather than technical terms
- thought some statements were too long and contained too much information
- thought that including some information on why the statement was important and ways to put it into practice (the 'whys and the hows') improved the accessibility of the statements. To compensate for increased length of the statements as a result, it was suggested that visual images could be included to help convey information
- overall similar themes came through between limited stakeholder and consumer focus group testing feedback.

Discussion

One TAG member asked if there were any conflicting statements between different ethnic groups. Differences identified included:

- the Māori and Pacific consumers liked all the cultural references in the activity statements like whānau, marae, hinegnaro etc.
- the European and South Asian consumers thought only commonly used Māori words should be included e.g. whānau and marae
- some consumers (Pacific Peoples mainly) were surprised about the duration of exercise recommended to lose weight, thinking it must be for athletes.

In relation to the weight related statements TAG members discussed whether these provided enough information for people/practitioners who wanted to address weight issues.

- Ministry staff commented that the Ministry has clinical weight management guidelines for practitioners that are designed to address specific weight concerns at an individual level.

Proposed changes to Statements, outstanding issues from feedback and fit with evidence (Agenda item 6)

The TAG split into nutrition and physical activity sub-groups to consider the statements that related to their specialist area.

Nutrition Sub-group discussion on the Eating Statements

It was explained that advice from the TAG would only be sought on the first four eating statements. The remaining two statements, on food safety and alcohol respectively will be further developed by people within the Ministry and other organisations i.e. Ministry for Primary Industries and Health Promotion Agency.

The statements provided for TAG discussion now contained changes following consideration of the communications, consumer and stakeholder feedback. This includes feedback from consumers that the statements would be improved by including some information on the specific benefit to health and examples of how to achieve them (the 'why and how').

Advice from the TAG Nutrition Sub-group was sought on:

- proposed changes to each statement wording taking into consideration the feedback as described above
- the appropriate evidence base or bases to underpin the statement
- outstanding issues identified via the stakeholder feedback process.

Eating Statement 1:

To be a healthy weight, balance your intake of food and drinks with your activity levels.

- *Being a healthy weight increases your chances of staying healthy, active and living longer.*
- *Being a healthy weight decreases your risk of getting diabetes, heart disease and cancer*

Discussion

- The inclusion of the 'why and how' information.
 - The 'how' information for this statement is to be developed after the meeting.
 - Not all TAG nutrition sub-group members ('the members') supported including the 'why and how'. Some thought it complicated the message.
 - The 'why and how' could form the next level of information beneath the statement.
- Position of Statement 1 in list.
 - Some thought having this as the first sentence brought a negative focus; healthy eating has more positive benefits so should be highlighted earlier.
 - Recommended statement 1 be moved lower down list and even become a statement that crosses over both eating and activity statements, as both factors need to be considered regarding weight.
- Many consumers didn't understand use of the term 'balance' in statement.
 - The members thought food quality and quantity and activity still need to be included as important determinants of weight, and health in general.
- One stakeholder group questioned the evidence regarding weight change being a result of energy in and energy out. They considered it was too simplistic and that other factors such as hormones are involved in weight regulation.
 - The members acknowledged that other factors are involved but the fundamental law of thermo-dynamics remains accepted and the message needs to be kept simple.

Decision

1 There will be an overarching positive focused statement that sits over both the eating and activity statements, to summarise the importance of diet and activity to health.

- Three options are proposed:
 - i) 'Eating, drinking and physical activity are key determinants of health'.
 - ii) 'The amount and type of food and physical activity are key determinants of health'.
 - iii) 'What and how much you eat and drink, and your level of physical activity strongly affect (or shape or impact) your health'.

2 Eating Statement 1 will be replaced by a weight specific statement that covers both eating and physical activity. Discuss details with Activity Sub-group.

3 The first Statement under the overarching general statement (see 1) will be about eating a variety of foods (current statement 2 – see below).

Eating statement 2:

Enjoy a variety of nutritious foods every day

- Eating a range of foods helps you get all the nutrients you need from food to be healthy.
- Include:
 - plenty of different coloured **vegetables and fruit**
 - e.g. *broccoli, kumara, cabbage, fresh or canned tomatoes, carrots, taro leaves, frozen green peas or beans, lettuce, apples, oranges, plums, feijoas, bananas.*
 - a range of **grains and cereals** that are naturally high in fibre – go for wholegrain or wholemeal options as much as possible
 - e.g. *wholegrain or wholemeal bread; wholemeal pasta, brown rice, wholemeal cereals like porridge and whole wheat biscuits*
 - some **low fat milk products** e.g. *green or yellow top milk, low fat yoghurt; or calcium-added milk alternatives (non-dairy milks) e.g. calcium added soy or rice milk*
 - some **legumes***, **nuts, seeds, fish, eggs, and/or poultry and red meat** with the fat removed.
 - **Legumes include cooked dried beans (e.g. baked beans), split peas (e.g. dahl), lentils and chickpeas (e.g. hummus).*

Discussion

- whether the 'hows' (examples) are culturally inclusive.
- Some members thought examples should be provided in the next level down of information rather than in the high level statements.
- Activity Statements received good feedback from consumers for including 'whys and hows'.

Vegetables and Fruit

- Good to include frozen vegetables and canned tomatoes to show cost effective and quick vegetable and fruit options are acceptable, especially as consumers thought this statement could be expensive and time consuming.
- Concern for Pacific Peoples with all these vegetables suggested, as to have one vegetable at a meal is an achievement.
- Use 'green leafy vegetables' instead of specific examples as this generic term includes many cultures vegetables without having to list them.
- some stakeholders wanted:
 - recommended number of servings of vegetables and fruit included
 - to know why Heart Foundation recommendations (at least 7 servings) were not recommended.

Grains and Cereals

- One stakeholder believed there was little evidence that grains protect against disease and some risk of decreased absorption of minerals with increased fibre intake.
 - Members were clear that there is evidence that grains protect against heart disease and certain cancers, including a recent BMJ paper (15 May 2014) on relationship between fibre, cardiovascular disease and increasing life expectancy. Other evidence is available from World Cancer Research Fund work, and the Nordic and American Guidelines.
- There is no agreed definition of wholegrain in the food supply, so the Ministry cannot offer the public a practical way to identify what is really 'wholegrain'.
- Stakeholder feedback that many consumers understand the term 'cereal' to mean the less healthy, low fibre options of breakfast cereal.

- Suggestions made to include healthiest examples of cereals like whole or rolled oats.
- some members were concerned re use of the term 'wholemeal' linked to bread and cereals as it may not represent a nutritionally superior product.
- Stakeholder feedback to quantify amount of 'grainy food needed'.
 - The current Ministry serving size advice is under review and quantities are not mentioned in any other eating statements.
- Members like wording and examples used for grains in Australian Guidelines and recommended adopting them.

Low Fat milk products

- One stakeholder disputed the need to recommend low fat milk products.
 - The members believed the recommendation is less clear cut than previously, but overall recommendation is still for low fat as seen in, for example, the USDA dietary patterns advice (USDA 2014).
 - Promotion of low fat dairy products has been a successful way for the population to decrease overall saturated fat intake.
- Same stakeholder claimed dairy fat is an important source of vitamins not easily found in other foods.
 - The members disagreed, saying fat soluble vitamins from milk fats are found in other foods. Discussion as to whether cheese should be included as an example. Mixed views held by members with some commenting that it is widely eaten so not having it was unrealistic. Others identified there are no calcium rich low fat cheese available. Also noted was that most of the calcium in cheese is not readily bioavailable.

Legumes, nuts, seeds, fish, eggs, and/or poultry and red meat

- Some stakeholders wanted inclusion of a recommendation to avoid processed meat.
 - Members felt statement 2 about what people could eat, so not appropriate to include foods to avoid. Could look at recommendation re processed meat as part of Statement 3.
- Some stakeholders wanted recommendations on quantities for meat and for legumes.
 - As previously noted current Ministry serving size advice is under review and quantities are not mentioned in any other eating statements so would be inconsistent to include.

Decisions

- Consult with Zirsha and Ofa re appropriate examples of foods that are inclusive for Māori and Pacific Peoples.
- Use the term 'green leafy vegetables' instead of naming specific green leafy foods.
- Remove the term 'wholemeal' in reference to bread and cereals.
- Do not add recommended number of servings of foods to Statements.
- Ministry to consider using Australian Guidelines wording for grains food group.
- Retain recommendation that low fat is the best option for milk products.
- Do not include cheese as an example of milk products.
- Consider a comment on processed foods as part of Statement 3.

Eating Statement 3:

Choose and prepare foods and drinks:

- With unsaturated (plant based) fats instead of saturated (mostly animal based) fats.
 - High saturated fat intakes increase your risk of heart disease and cancer.
 - *Fat from animals as well as coconut oil and palm oil have a lot of saturated fat.*

- The body needs some fat, and the best type of fat is unsaturated which comes mainly from plants.
 - *Examples of healthy plant based fats include canola and olive oil and plant based margarines.*
 - *Other sources of healthy fats include seeds, nuts, avocados.*
- Be aware that all fat, whether animal or plant based, is very high in energy (calories). Watch your total fat intake as high fat intakes are linked with increased risk of obesity.
- That are low in salt (sodium); if using salt, choose iodised salt.
 - High intakes of salt may increase your risk of heart disease, stroke, kidney disease and some cancers.
- With little or no added sugar.
 - Adding sugar increases the energy (calorie) content of food and drinks
 - A high or regular intake of foods and drinks with added sugar can lead to tooth decay.

Discussion

Fat

- A number of stakeholders commented that recommending minimal fat intake was not supported by recent evidence, which instead recommends replacing saturated fat with unsaturated fat in the diet, rather than a focus to decrease total fat. New Zealand data (2008/09 NZANS) has also reported New Zealanders' total fat intake falls within the recommended range, but saturated fat intake is still too high.
 - As a result the Ministry had changed the wording of the fat section of the statement to reflect this changed focus. The Ministry had also added a comment to statement that fat is high in energy whether saturated or unsaturated. This was to address concerns that the change could encourage people to eat more total fat because they think it is healthy, as well as in recognition that over half the adult population are overweight.
 - Some members thought that as statement 3 is about the type and amount of fat the comment related to its energy content didn't fit. May fit better in new comment re weight to cross both eating and activity statements.
- One stakeholder recommended avoiding all fats (including polyunsaturated fatty acids) and 'non-traditional oils' used in processed and deep fried foods.

Saturated fat

- Two stakeholders refuted the need to restrict saturated fat intake because it has little impact on cardiovascular risk.
 - The outcome of a significant discussion by the members on this issue was that the evidence still strongly supports recommendations to decrease saturated fat intake. Also all major western nations and the World Health Organization (WHO) continue to recommend restricting saturated fat intake. Specific graded evidence available from Australia and America as well as recent American and Nordic systematic reviews on dietary food patterns to support their guidelines. Recommendation to refer to NZ Medical Journal article (April 2014) by Mann for summary of evidence on saturated fat.
- The wording of this statement should be refocused to put positive (what people can do) points first. Also recommendation to remove terms 'plant based' and 'animal based' as not strictly correct and examples of saturated and unsaturated fats are provided to help people understand. Members recommended using Australian Guidelines wording for fats. Some members thought including examples of healthier cooking methods could be part of the 'how'.

Decisions

- Retain message to reduce saturated fat intake by replacing with unsaturated fats, and remove recommendation to reduce total fat intake as key message.

- Remove comment on the energy value of fat.
- Put positive messages first i.e. healthy fats first in Statement, followed by unhealthy fats
- Remove the terms 'plant based' and 'animal based'.
- Consider the Australian Guidelines wording on fat.
- Add healthy cooking methods such as steaming and grilling as part of the 'how'.

- Two options for updated statement:
 - i) Choose and prepare foods and drinks:
 - With unsaturated fats instead of saturated fats.
 - The body needs some fat, and the best type of fat is unsaturated which comes mainly from plants.
 - *Examples of healthy unsaturated fats include canola and olive oil and margarines.*
 - *Other sources of healthy fats include seeds, nuts, and avocados.*
 - High saturated fat intakes increase your risk of heart disease.
 - *Fat from animals as well as coconut oil and palm oil have a lot of saturated fat.*
 - ii) Australian Guidelines wording:

Limit intake of foods containing saturated fat, added salt, added sugars and alcohol

 - a. Limit intake of foods high in saturated fat such as many biscuits, cakes, pastries, pies, processed meats, commercial burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.
 - Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominantly polyunsaturated and monounsaturated fats such as oils, spreads, nut butters/pastes and avocado.

Salt

- One stakeholder questioned the need to recommend reducing salt intake as believes evidence supporting this is not strong.
 - The members thought it is important to reduce salt intake as small improvements in health individually are significant at a population level. Also key international organisations and countries continue to support reducing salt intake e.g. WHO in their Global Action Plan for the Prevention and Control of Non-Communicable Diseases 2013-2020 (WHO 2013); Nordic Guidelines.
- Discussion on whether to specifically include advice: 'do not add' to cooking at the table, like the Australian Guidelines.
 - Members generally not keen as most of salt intake comes from processed food rather than salt added at home. Also advice in statements includes food preparation.
- The members acknowledged the possibility for confusion re salt message as it is fortified with iodine, a mineral people need more of. Iodine issue could be explained in next layer of information on salt statement in core paper for practitioners.

Decisions

- No changes to current salt statement:

Choose and prepare foods and drinks:

 - That are low in salt (sodium); if using salt, choose iodised salt.
 - High intakes of salt may increase your risk of heart disease, stroke, kidney disease and some cancers.

Sugar

Discussion

- Use the terms 'free sugars' and 'added sugars'.

Decisions

- No changes to current sugar statement:

Choose and prepare foods and drinks:

- With little or no added sugar.
 - Adding sugar increases the energy (calorie) content of food and drinks
 - A high or regular intake of foods and drinks with added sugar can lead to tooth decay.

Eating Statement 4:

Make water your first choice over other drinks

- The body needs water to survive and work well.
- Town supplied tap water in New Zealand is safe to drink and widely available. If you are not on a town supply check the safety of your water with your local council
- Plain water contains no energy (calories) so won't cause you to put on weight and is the best way to satisfy thirst.
 - *Limit high sugar drinks like fizzy drinks to treats only (for example, once a week).*

Discussion

- This Statement is fairly uncontroversial and doesn't need any amendment.

Decision

- No changes to current Statement 4.

Physical Activity Sub-group discussion on the Activity Statements

It was explained that the Activity Statements had been through limited stakeholder consultation and focus group testing and a re-drafted version of the activity statements had been provided to the TAG members.

- These statements reflected consultation feedback where appropriate.
- More weight was given to suggestions that received multiple comments.
- The statements were written in plain English where possible, but contained enough technical information that they were technically accurate and underpinned by evidence.

The Ministry has received permission from the Australian Department of Health to use the Development of Evidence-based Physical Activity recommendations for Adults (18-64 years) – August 2012 (the Australian Report) as the evidence base for the New Zealand activity statements.

Activity Statement 1:

Sit less, move more! Reduce sedentary behaviour and break up long periods of sitting.

- Sitting less can help you live healthier and longer.
 - *Stand up and move regularly throughout the day, at least every hour.*
 - *If you are watching television, get up during the ad breaks.*

- *If you sit a lot at work, get into the habit of getting up and moving at least every hour.*
- *See standing and moving as an opportunity, not an inconvenience.*

Discussion

- Whether the focus of Statement 1 should be narrowed so it relates only to breaking up sitting rather than standing and moving
- Whether the Statement “sit less, move more” will prevent people from doing it (because of the call to move) or whether it was a positive call to action.

Decision

- The level 1 statement is acceptable as presented.
- Make minor wording changes for the “why” and “how” levels.
- Add that sitting time being independent from physical activity levels should be added into the “why” level.
- The National Health and Medical Research Council (NHMRC) grade A/B evidence presented in the Australian Report is suitable to underpin statement 1.

Activity Statement 2:

Do at least 150 minutes (2½ hours) of moderate-intensity or 75 minutes (1¼ hours) of vigorous-intensity physical activity spread throughout the week.

- Moderate- and vigorous-intensity activities are great for the heart, lungs, and overall fitness and wellbeing. Examples of these activities can be found in Table X
 - *Moderate-intensity activities cause a slight but noticeable increase in breathing and heart rate.*
 - *Vigorous-intensity activities significantly increase breathing and heart rate.*
 - *You can achieve this recommendation by doing 30 minutes of moderate-intensity, or 15 minutes of vigorous-intensity physical activity on five days per week.*
 - *If you have been physically inactive for some time, are just starting out, or have certain health conditions you may wish to consult a health practitioner or physical activity specialist to ensure your safety before you start being physically active.*

Discussion

- The need to recommend that physically inactive people or those with a health condition need to visit a doctor before starting physical activity.
- Building physical activity into a daily routine so it becomes habitual should be inserted.

Decision

- This Statement is important, but flows better after the statements quantifying the amount of physical activity needed for health benefits and extra health benefits.
- Move this statement to Statement 4.
- Inclusion of the words whānau and friends is important.
- The NHMRC grade A evidence presented in the Australian Report is suitable to underpin Statement 4.

Activity Statement 3:

Aim to do at least 300 minutes (5 hours) of moderate-intensity or 150 minutes (2½ hours) of vigorous-intensity of physical activity for extra health benefits and to manage your weight.

- If you already meet the guidelines, increase the amount of physical activity you do for extra health benefits.

- *Double the recommended amount of time being active to reduce weight.*
- *Increase the intensity of your activity for other health benefits including XXX.*

Discussion

- The wording of the “why” section could be reduced by combining the statements on moderate-intensity and vigorous-intensity into one statement. The importance of spreading activity throughout the week is necessary in the context of this Statement.
- The sentence on combining moderate- and vigorous-intensity activity is redundant and self-explanatory so should be removed from the “why” section.

Decisions

- The level 1 statement is acceptable as presented.
- Move this Statement to activity statement 2.
- Move the examples given in the “why” section into the “how” section.
- Remove the sentence on combining moderate- and vigorous-intensity activity.
- The NHMRC grade for doing 2 ½ hours of physical activity was not given in the Australian Report. However, it was discussed that the evidence for this recommendation appears strong, and is consistent with evidence from the World Health Organization, the United States of America, the United Kingdom and Australia.
- The Ministry has contacted the Department of Health Australia to find out whether this was missing due to an error or because it is actually ungraded.
- The NHMRC grade B evidence for supporting activity being spread throughout the week as presented in the Australian Report is suitable to underpin statement 2.

Activity statement 4:

Include some muscle- and bone-strengthening activities on at least two days per week.

- Muscle and bone strengthening activities are important for keeping your body strong, lifting and carrying, and reducing the risk of falling or injury.
 - *Strengthen your muscles and bones with resistance activities such as walking up hills or stairs, yoga, Pilates, swimming, aerobics, heavy gardening or weight lifting.*

Discussion

- An overarching eating and activity statement on weight is needed.
- The current statement 4 doesn't take into consideration the importance of food in reducing weight.
- Evidence from the World Cancer Research Fund (WCRF) underpins the benefits of physical activity for prevention of some cancers including colon, postmenopausal breast, and endometrial cancer.
- The evidence for recommending 60 minutes of physical activity for weight loss is unproven. Sixty minutes of moderate-intensity physical activity relates to prevention of weight gain only.

Decision

- Move this statement to Activity Statement 3.
- The NHMRC grade A/B evidence presented in the Australian Report is suitable to underpin Statement 3 for extra health benefits such as reducing the likelihood of some cancers, but not weight loss.

Activity statement 5:

If you currently do no physical activity, start by doing some activity, and then build up to the recommended amount.

- Doing something is better than doing nothing. All physical activity you do counts towards the total
 - *Walk or cycle to work, the marae or church, play actively with the children, meet friends for a walk, do active jobs around the house*
 - *Incidental activity¹, active jobs², and active transport³ and all helps towards the total.*
 - *Build the activities into your daily routine that you are likely to stick to!*
 - *Consider joining a gym or sports club.*
 - *Set yourself goals to achieve.*
- Being physically active with others is good for your overall wellbeing and can motivate you to stay active.
 - *Being physically active with whānau is good for the hinengāro (mental and emotional wellbeing) of tangata.*
 - *Do a variety of activities with whānau and friends that you enjoy and want to keep doing.*

Discussion

- This statement was fairly uncontroversial.
- This statement is seen as a new concept by focus groups.

Decision

- This statement is acceptable as presented.
- Although the concept is new, it is important to include.
- The NHMRC grade A/B evidence presented in the Australian Report is suitable to underpin Statement 5.

Group discussion (Agenda item 7)

Full TAG discussion

Activity Statements

Activity Statement 1:

Discussion

- Whether the focus of the Statement is to reduce sedentary behaviour or to increase physical activity. This will have a bearing on the final statement wording.
- That less sitting time is more important for this Statement than moving which comes later.
- Questioned whether the “living longer” part is evidence based.

¹ Incidental activity is physical activity that you DO as part of usual daily living. Activities of Daily Living (ADLs) are important as they accumulate to help achieve the weekly guideline recommendations, and importantly reduce the time person spends being sedentary. ADLs include walking the dog, washing the car, gardening, and other household chores.

² Occupational activities are physical activities carried out as part of work. They can help prevent health conditions and enhance general health, and may count towards meeting the weekly physical activity recommendations.

³ Active transport is physical activity used as a mode of transport from one destination to another. It includes walking to the shops, cycling, scooting and skating.

Decisions

- This Statement is primarily about reducing sitting time.
- Remove phrase “living longer” .
- Remove “rather than a hassle”.

Activity Statement 2:

Discussion

- The nutrition group had used plain English throughout and the Activity Statements may be too technical as it talks about moderate and vigorous activity.
- The technical accuracy is beyond question and consistent with international jurisdictions.
- The Statement is fairly uncontentious.

Decision

- The Statement should stay the same as we need to balance the use of plain English with technical accuracy.

Activity Statement 3:

Discussion

- Both the nutrition and physical activity sub-groups thought it would be useful to have a combined weight statement.
- The evidence base for physical activity alone to reduce weight is patchy.
- The evidence base for physical activity to lower the risk of some cancers is good but we shouldn't list individual cancers.

Decisions

- Create a separate weight related joint overarching nutrition and physical activity statement . Remove the words “to manage your weight” from this Statement
- Remove individual cancer types from the Statement so it reads “lowers the risk of some cancers”.
- Use WCRF evidence base to underpin this Statement.

Activity Statement 4:

Discussion

- Green Prescriptions should go in this Statement
- The Statement should be framed positively like the others.

Decision

- Add Green Prescriptions to this Statement.
- Change wording to “doing some physical activity is better than doing nothing (or no physical activity).”

Activity Statement 5:

Discussion

- Consistent terminology should be used throughout the document with reference to tamariki, whānau and doctor etc.

Decisions

- The Statement is acceptable, but the whys and hows need to be checked for technical accuracy.
- Use Māori terms such as tamariki and whanau consistently, but also have the English version in brackets.
- Use the title 'doctor' instead of 'GP'.

Eating Statements

Discussion

- A brief overview of the nutrition group's discussion and decisions were presented on the Eating Statements to the whole TAG

Weight related statement

- Further discussion was had about the idea of replacing the separate weight related statements in both the Eating and Activity Statements with one statement that addresses both eating and activity.
 - Both Nutrition and Activity Sub-groups had separately come to the same conclusion re one joint statement.
 - This new "weight statement" should sit after the Eating Statements, but before the activity statements.
 - A few different sentences were discussed before the TAG settled on the new weight statement:

Decision:

- The new 'weight statement' which covers both eating and activity will be included after the eating statements and before the activity statements.
- Agreed wording:

'Food, drinks and physical activity are key to achieving a healthy body weight:

- A healthy weight:
 - Increases your chances of staying well and active
 - Decreases your risk of getting diabetes, heart disease and some cancers.
- To prevent excess weight gain and to lose weight:
 - choose nutritious foods which are low in energy (minimal fat and no added sugar)
 - drink water instead of sugary drinks and/or alcoholic drinks
 - reduce your portion sizes
 - sit less and reduce screen time
 - be as active as you can

Eating Statement 3 – fat

Decision

- Due to limited time the Chair suggested a video conference to talk about fat related part of Statement 3 including finalising the wording.

Eating Statement 3 – sugar

Discussion

- One member commented that we need to get wording right with regards to effects on dental

Decision

- Accept most of the current but review wording related to oral health.

Eating Statement 4

Discussion

- One member suggested removing comment on treats and quantifying the term 'limit' i.e. once a week, as no other quantities are provided in Statements.

Decision

- Remove as above.

Additional issue

Discussion

- Statement or part of statement regarding recommendations on processed food.
 - A number of stakeholders wanted a recommendation to minimise intake of processed food.
 - General recommendations on 'processed foods' are complicated as many foods we consider acceptable have had some processing i.e. bread, flour, frozen vegetables.
 - Need to be clear exactly what type of foods we are meaning. Some suggested using the term 'minimally processed' to describe an acceptable level of processing .
 - 'Ultra processed' is a term being used in some literature to describe high sugar, high fat, refined foods. (One paper describing 4 levels of processing may be useful so will be circulated with minutes).
 - Suggestion to re-consider issue once other suggested changes made to statements. Could address issue with use of examples.

Decision

- Re-consider issue once other suggested changes made to statements. Could address issue with use of examples.

See Appendix 1 for the statements revised as a result of this 2nd TAG meeting.

Other issues to consider (Agenda item 9)

TAG #2 – 11 June 2014

Minutes – for attendees approval

Current EAGS related work going on was highlighted:

- Eating and Activity Guidelines for Adult New Zealanders (the core paper)
- Guidance for Healthy Weight Gain in Pregnancy (for June 2014 publication)
- review of Ministry's current portion/serving size advice
- vitamin D statements (already published).

Considerations for prioritising further EAGS related work (in no particular order) are:

- overall EAGS project goals, for example, the ongoing timely release of publications:
- time since issue last reviewed
- new or changing evidence including international reviews
- opportunities arising e.g. relevance to current initiatives such as maternity and child health, *Healthy Families New Zealand*
- sector need, including gaps in current information
- government priorities
- resourcing.

TAG members were invited to suggest issues or topics for the EAGS that from their perspective should be prioritised, particularly related to new or changing evidence, and sector need.

- A TAG member suggested saturated fat as a possible topic for review. Concern expressed that the health sector and public may be getting mixed messages on this currently. The feasibility of such a review and importance of it being independent was discussed.

Round up and conclusion of meeting – (Agenda item 10)

TAG members were invited to:

- provide any further suggestions on priority issues or topics (Agenda item 9) to the Ministry after the meeting via phone or email
- to forward any conflicts of interest to the Ministry following the meeting.

The Chair officially closed the meeting and thanked everyone for their contribution.

Next meeting: A videoconference to review the statement changes as a result of the meeting and to finalise them will be arranged in the next one or two months.

Appendix 1 – revised statements post TAG 11 June 2014

Agreed wording for the eating statements following the meeting:

Overarching statement for Eating and Activity Statements:

- Three options are proposed:
 - i) 'Eating, drinking and physical activity are key determinants of health'.
 - ii) 'The amount and type of food and physical activity are key determinants of health'.
 - iii) 'What and how much you eat and drink, and your level of physical activity strongly effect (or shape or impact) your health'.

1. Enjoy a variety of nutritious foods every day

- Eating a range of foods helps you get all the nutrients you need from food to be healthy.
- Include:

- plenty of different coloured **vegetables and fruit**

- *e.g. broccoli, kumara, cabbage, fresh or canned tomatoes, carrots, green leafy vegetables, frozen green peas or beans, lettuce, apples, oranges, plums, feijoas, bananas.*

- a range of **grains and cereals** that are naturally high in fibre – go for wholegrain options as much as possible

- *e.g. wholegrain bread; wholemeal pasta, brown rice, wholegrain cereals like porridge and whole wheat biscuits*

or as per Australian GLs:

Grains (cereal) foods, mostly wholegrain and/or high cereal fibre varieties, such as breads, cereals rice, pasta, noodles, polenta, couscous, oats, quinoa and barley

- some **low fat milk products** *e.g. green or yellow top milk, low fat yoghurt; or calcium-added milk alternatives (non-dairy milks) e.g. calcium added soy or rice milk*

- some **legumes***, **nuts, seeds, fish, eggs, and/or poultry and red meat** with the fat removed.

**Legumes include cooked dried beans (e.g. baked beans), split peas (e.g. dahl), lentils and chickpeas (e.g. hummus).*

2. Choose and prepare foods and drinks:

- With unsaturated fats instead of saturated fats.
 - The body needs some fat, and the best type of fat is unsaturated which comes mainly from plants.
 - *Examples of healthy plant based fats include canola and olive oil and plant based margarines.*
 - *Other sources of healthy fats include seeds, nuts, avocados.*
 - High saturated fat intakes increase your risk of heart disease.
 - *Fat from animals as well as coconut oil and palm oil have a lot of saturated fat.*

Or Australian Guidelines wording:

Limit intake of foods containing saturated fat, added salt, added sugars and alcohol

- a. Limit intake of foods high in saturated fat such as many biscuits, cakes, pastries, pies, processed meats, commercial burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.

- Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominantly polyunsaturated and monounsaturated fats such as oils, spreads, nut butters/pastes and avocado.

Choose and prepare foods and drinks:

- That are low in salt (sodium); if using salt, choose iodised salt.
 - High intakes of salt may increase your risk of heart disease, stroke, kidney disease and some cancers.
 - With little or no added sugar.
 - Adding sugar increases the energy (calorie) content of food and drinks
 - A high or regular intake of foods and drinks with added sugar can lead to tooth decay
3. Make water your first choice over other drinks
- The body needs water to survive and work well.
 - Town supplied tap water in New Zealand is safe to drink and widely available. If you are not on a town supply check the safety of your water with your local council
 - Plain water contains no energy (calories) so won't cause you to put on weight and is the best way to satisfy thirst.
 - *Limit high sugar drinks like fizzy drinks.*

Single weight-related statement for eating and activity statements:

Food, drinks and physical activity are key to achieving a healthy body weight:

- A healthy weight:
 - Increases your chances of staying well and active
 - Decreases your risk of getting diabetes, heart disease and some cancer.
- To prevent excess weight gain and to lose weight:
 - choose nutritious foods which are low in energy (minimal fat and no added sugar)
 - drink water instead of sugary drinks and/or alcoholic drinks
 - reduce your portion sizes
 - sit less and reduce screen time
 - be as active as you can

Appendix 1 – revised statements post TAG 11 June 2014

Agreed wording for the activity statements following the meeting:

1: Sit less, move more! Break up long periods of sitting.

- Standing up more often can help your health, even if you are already physically active.
 - Break up the time you are sitting throughout the day for at least a few minutes every hour, preferably more.
 - See standing and moving as an opportunity.

2: Do at least 2 ½ hours of moderate-intensity or 1 ¼ hour of vigorous-intensity aerobic physical activity spread throughout the week.

- Aerobic activities are great for the heart, lungs, and overall fitness and wellbeing.
- You can achieve this guideline by doing at least 30 minutes of moderate-intensity or 15 minutes of vigorous-intensity aerobic activity on 5 days a week.
 - Moderate-intensity activities make you breathe harder but you should still be able to enjoy a chat while doing them e.g. brisk walking on flat ground, playing with tamariki (children), and dancing.
 - Vigorous-intensity activities make you breathe a lot harder and you won't be able to chat while doing them e.g. by walking fast or walking uphill, running, swimming or doing kapa haka.
- It is important that the physical activity is spread throughout the week.
 - Physical activity doesn't have to be done all at once – break it into smaller more manageable chunks.

3: For extra health benefits, aim for 5 hours of moderate-intensity activity; 2 ½ hours of vigorous-intensity activity per week or an equivalent combination of both.

- More time spent being active or increasing the intensity of the activity will provide extra health benefits such as increased fitness and reduced risk of some cancers.
- You can achieve this guideline by doing at least 60 minutes of moderate-intensity or 30 minutes of vigorous-intensity aerobic activity on 5 days a week.
 - High-intensity intermittent training (short periods of intense anaerobic activity with less recovery in between) is also time efficient and good for your weight.

4: Doing some activity is better than doing no activity.

- Make sure what you do is fun and build it into your daily routine.
 - Walk or cycle to places you might normally drive to, play actively with the tamariki, take the stairs instead of using the lift, do active jobs around the house, go fishing or gathering kai for dinner.
- Being physically active with whānau and friends is good for your overall wellbeing (and theirs) and can motivate you to stay active.
- If you have a health condition you may wish to consult your doctor or physical activity specialist before starting physical activity.
 - Talk to your doctor or practice nurse about a Green Prescription (GRx). A GRx is advice to you to be physically active, as part of your overall health management. It includes a written referral to a GRx coordinator who will support you to become more active.

5: Include some muscle and bone strengthening activities at least two days each week

- Muscle and bone strengthening helps to keep your body strong and reduce the risk of injury.
- Muscle strengthening requires pushing or pulling against a heavy object or weight which provides a force to stop you.
 - Strengthen your muscles with resistance activities such as walking up hills or stairs, digging in the garden, carrying the shopping or weight lifting.
- Bone strengthening requires doing activities that place impact on your bones
 - Strengthen your bones with impact activities such as walking, running, jumping, active sports.
- These activities can be done around the home, outside, in the community, or under the supervision of a trained professional at a gym or sports club.

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Minutes of the Second Meeting of the Technical Advisory Group for the Eating and Activity Guidelines

11 June 2014

09.30 to 16.00

Held in room G05 – Ground Floor North

Ministry of Health

133 Molesworth Street

WELLINGTON

In Attendance

Members of the TAG

Professor Jim Mann (Chair)

Delvina Gorton

Dr Clare Wall

Dr Ofa Dewes

Dr Pamela von Hurst

Dr Scott Duncan

Zirsha Wharemate

Louise McIntyre

Secretariat, Ministry of Health

Martin Dutton

Secretariat, Ministry of Health

Dr Harriette Carr (pm only)

Ministry of Health

Elizabeth Aitken

Ministry of Health

Laree Taula

Ministry of Health contractor

Maria Turley

Ministry of Health

Dr Mary-Ann Carter

Health Promotion Agency

Apologies

Dr Sandy Mandic

Professor Murray Skeaff

Dr Darren Hunt

Welcome (Agenda item 2)

Zirsha was welcomed as the newest TAG member.

Introductions

The group introduced themselves, including where they work and what their role is.

Confidentiality and conflicts of interest (Agenda item 3)

The Chair noted that the Terms of Reference includes a confidentiality clause and that all discussions held at the meeting be in confidence. TAG members were also asked to update the conflict of interest register circulated during the meeting.

Update since last TAG meeting (Agenda item 4)

The plan for the day and a brief overview of what has happened since the last TAG meeting was summarised. This update included:

TAG #2 – 11 June 2014

Minutes – for attendees approval

- Change to planned publication date of core paper and webpage
 - original date of August 2014 now pushed out to tentative date of 1 December 2014, following announcement of 20 September 2014 election date.
- New communications contractor (short term)
 - to support communication with the sector and media regarding the Eating and Activity Guidelines Series (EAGS).
- Webpage redevelopment
 - changes to Ministry's Guidelines webpage for practitioners to incorporate information, documents and key links related to EAGS.
- Format and design of core paper
 - provider to design and format core paper has been selected
 - core paper aims to be easy to read, more visual with infographics, pictures, and diagrams as well as having an easy to print format.
- Guidelines statements
 - following November's TAG meeting the nutrition group provided further email feedback on eating guidelines
 - both eating and activity statements then underwent a limited communications review by Health Promotion Agency, limited stakeholder consultation and consumer focus group testing
 - statements for discussion were revised based on consideration of above feedback.

The TAG was informed that the outcome sought for the day was to finalise the statements and agree on the evidence base to underpin them. (See Appendix 1 for the statements revised as a result of this 2nd TAG meeting)

Feedback on Statements (Agenda item 5)

Limited stakeholder consultation

Twenty three external stakeholder organisations and nine internal Ministry teams were invited to comment on the draft eating and activity statements. External stakeholders included health practitioner groups, dietitians, physical activity specialists, community health providers, the food industry and others. Twenty submissions were received in total.

The key feedback report was distributed as part of the pre-meeting reading. The main feedback points from stakeholders were that:

- most generally liked the statements
- most wanted them to be in plain English with less technical language
- some wanted a more multicultural focus
- some wanted an overarching statement for eating and activity statements
- some wanted the statements to contain quantified information, for example, on amount of food and duration of activities being recommended
- some had different views on recommendations for total fat and/or saturated fat, and/or grains and/or salt. Some wanted more specific advice on reducing processed food.

Discussion

The TAG said it was important to know if:

- the comments came from one person/organisation, or several, in order to know how much weighting to give the comments
- The group was told that this information was in the feedback report.

Consumer focus group testing

The consumer focus group testing of the draft eating and activity statements was undertaken by Litmus Ltd for the Ministry. The testing involved four focus groups with adult New Zealanders who identify as New Zealand European, Māori, Pacific and South Asian.

A copy of the key findings report was distributed as part of the pre-meeting reading. The main feedback points were that consumers:

- were generally familiar with the eating statements and thought they were largely achievable and accessible. The exception was statement 2 ('Eat a variety of foods every day including...'), which consumers thought sounded expensive and time consuming to do
- were less familiar with the activity statements and thought they were written for a technical or scientific audience
- thought statements that included specific quantified advice were most effective in encouraging people to consider how the statement applied to them
- preferred the use of plain English rather than technical terms
- thought some statements were too long and contained too much information
- thought that including some information on why the statement was important and ways to put it into practice (the 'whys and the hows') improved the accessibility of the statements. To compensate for increased length of the statements as a result, it was suggested that visual images could be included to help convey information
- overall similar themes came through between limited stakeholder and consumer focus group testing feedback.

Discussion

One TAG member asked if there were any conflicting statements between different ethnic groups. Differences identified included:

- the Māori and Pacific consumers liked all the cultural references in the activity statements like whānau, marae, hinegnaro etc.
- the European and South Asian consumers thought only commonly used Māori words should be included e.g. whānau and marae
- some consumers (Pacific Peoples mainly) were surprised about the duration of exercise recommended to lose weight, thinking it must be for athletes.

In relation to the weight related statements TAG members discussed whether these provided enough information for people/practitioners who wanted to address weight issues.

- Ministry staff commented that the Ministry has clinical weight management guidelines for practitioners that are designed to address specific weight concerns at an individual level.

Proposed changes to Statements, outstanding issues from feedback and fit with evidence (Agenda item 6)

The TAG split into nutrition and physical activity sub-groups to consider the statements that related to their specialist area.

Nutrition Sub-group discussion on the Eating Statements

It was explained that advice from the TAG would only be sought on the first four eating statements. The remaining two statements, on food safety and alcohol respectively will be further developed by people within the Ministry and other organisations i.e. Ministry for Primary Industries and Health Promotion Agency.

The statements provided for TAG discussion now contained changes following consideration of the communications, consumer and stakeholder feedback. This includes feedback from consumers that the statements would be improved by including some information on the specific benefit to health and examples of how to achieve them (the 'why and how').

Advice from the TAG Nutrition Sub-group was sought on:

- proposed changes to each statement wording taking into consideration the feedback as described above
- the appropriate evidence base or bases to underpin the statement
- outstanding issues identified via the stakeholder feedback process.

Eating Statement 1:

To be a healthy weight, balance your intake of food and drinks with your activity levels.

- *Being a healthy weight increases your chances of staying healthy, active and living longer.*
- *Being a healthy weight decreases your risk of getting diabetes, heart disease and cancer*

Discussion

- The inclusion of the 'why and how' information.
 - The 'how' information for this statement is to be developed after the meeting.
 - Not all TAG nutrition sub-group members ('the members') supported including the 'why and how'. Some thought it complicated the message.
 - The 'why and how' could form the next level of information beneath the statement.
- Position of Statement 1 in list.
 - Some thought having this as the first sentence brought a negative focus; healthy eating has more positive benefits so should be highlighted earlier.
 - Recommended statement 1 be moved lower down list and even become a statement that crosses over both eating and activity statements, as both factors need to be considered regarding weight.
- Many consumers didn't understand use of the term 'balance' in statement.
 - The members thought food quality and quantity and activity still need to be included as important determinants of weight, and health in general.
- One stakeholder group questioned the evidence regarding weight change being a result of energy in and energy out. They considered it was too simplistic and that other factors such as hormones are involved in weight regulation.
 - The members acknowledged that other factors are involved but the fundamental law of thermo-dynamics remains accepted and the message needs to be kept simple.

Decision

1 There will be an overarching positive focused statement that sits over both the eating and activity statements, to summarise the importance of diet and activity to health.

- Three options are proposed:
 - i) 'Eating, drinking and physical activity are key determinants of health'.
 - ii) 'The amount and type of food and physical activity are key determinants of health'.
 - iii) 'What and how much you eat and drink, and your level of physical activity strongly affect (or shape or impact) your health'.

2 Eating Statement 1 will be replaced by a weight specific statement that covers both eating and physical activity. Discuss details with Activity Sub-group.

3 The first Statement under the overarching general statement (see 1) will be about eating a variety of foods (current statement 2 – see below).

Eating statement 2:

Enjoy a variety of nutritious foods every day

- Eating a range of foods helps you get all the nutrients you need from food to be healthy.
- Include:
 - plenty of different coloured **vegetables and fruit**
 - e.g. *broccoli, kumara, cabbage, fresh or canned tomatoes, carrots, taro leaves, frozen green peas or beans, lettuce, apples, oranges, plums, feijoas, bananas.*
 - a range of **grains and cereals** that are naturally high in fibre – go for wholegrain or wholemeal options as much as possible
 - e.g. *wholegrain or wholemeal bread; wholemeal pasta, brown rice, wholemeal cereals like porridge and whole wheat biscuits*
 - some **low fat milk products** e.g. *green or yellow top milk, low fat yoghurt; or calcium-added milk alternatives (non-dairy milks) e.g. calcium added soy or rice milk*
 - some **legumes***, **nuts, seeds, fish, eggs, and/or poultry and red meat** with the fat removed.
 - **Legumes include cooked dried beans (e.g. baked beans), split peas (e.g. dahl), lentils and chickpeas (e.g. hummus).*

Discussion

- whether the 'hows' (examples) are culturally inclusive.
- Some members thought examples should be provided in the next level down of information rather than in the high level statements.
- Activity Statements received good feedback from consumers for including 'whys and hows'.

Vegetables and Fruit

- Good to include frozen vegetables and canned tomatoes to show cost effective and quick vegetable and fruit options are acceptable, especially as consumers thought this statement could be expensive and time consuming.
- Concern for Pacific Peoples with all these vegetables suggested, as to have one vegetable at a meal is an achievement.
- Use 'green leafy vegetables' instead of specific examples as this generic term includes many cultures vegetables without having to list them.
- some stakeholders wanted:
 - recommended number of servings of vegetables and fruit included
 - to know why Heart Foundation recommendations (at least 7 servings) were not recommended.

Grains and Cereals

- One stakeholder believed there was little evidence that grains protect against disease and some risk of decreased absorption of minerals with increased fibre intake.
 - Members were clear that there is evidence that grains protect against heart disease and certain cancers, including a recent BMJ paper (15 May 2014) on relationship between fibre, cardiovascular disease and increasing life expectancy. Other evidence is available from World Cancer Research Fund work, and the Nordic and American Guidelines.
- There is no agreed definition of wholegrain in the food supply, so the Ministry cannot offer the public a practical way to identify what is really 'wholegrain'.
- Stakeholder feedback that many consumers understand the term 'cereal' to mean the less healthy, low fibre options of breakfast cereal.

- Suggestions made to include healthiest examples of cereals like whole or rolled oats.
- some members were concerned re use of the term 'wholemeal' linked to bread and cereals as it may not represent a nutritionally superior product.
- Stakeholder feedback to quantify amount of 'grainy food needed'.
 - The current Ministry serving size advice is under review and quantities are not mentioned in any other eating statements.
- Members like wording and examples used for grains in Australian Guidelines and recommended adopting them.

Low Fat milk products

- One stakeholder disputed the need to recommend low fat milk products.
 - The members believed the recommendation is less clear cut than previously, but overall recommendation is still for low fat as seen in, for example, the USDA dietary patterns advice (USDA 2014).
 - Promotion of low fat dairy products has been a successful way for the population to decrease overall saturated fat intake.
- Same stakeholder claimed dairy fat is an important source of vitamins not easily found in other foods.
 - The members disagreed, saying fat soluble vitamins from milk fats are found in other foods. Discussion as to whether cheese should be included as an example. Mixed views held by members with some commenting that it is widely eaten so not having it was unrealistic. Others identified there are no calcium rich low fat cheese available. Also noted was that most of the calcium in cheese is not readily bioavailable.

Legumes, nuts, seeds, fish, eggs, and/or poultry and red meat

- Some stakeholders wanted inclusion of a recommendation to avoid processed meat.
 - Members felt statement 2 about what people could eat, so not appropriate to include foods to avoid. Could look at recommendation re processed meat as part of Statement 3.
- Some stakeholders wanted recommendations on quantities for meat and for legumes.
 - As previously noted current Ministry serving size advice is under review and quantities are not mentioned in any other eating statements so would be inconsistent to include.

Decisions

- Consult with Zirsha and Ofa re appropriate examples of foods that are inclusive for Māori and Pacific Peoples.
- Use the term 'green leafy vegetables' instead of naming specific green leafy foods.
- Remove the term 'wholemeal' in reference to bread and cereals.
- Do not add recommended number of servings of foods to Statements.
- Ministry to consider using Australian Guidelines wording for grains food group.
- Retain recommendation that low fat is the best option for milk products.
- Do not include cheese as an example of milk products.
- Consider a comment on processed foods as part of Statement 3.

Eating Statement 3:

Choose and prepare foods and drinks:

- With unsaturated (plant based) fats instead of saturated (mostly animal based) fats.
 - High saturated fat intakes increase your risk of heart disease and cancer.
 - *Fat from animals as well as coconut oil and palm oil have a lot of saturated fat.*

- The body needs some fat, and the best type of fat is unsaturated which comes mainly from plants.
 - *Examples of healthy plant based fats include canola and olive oil and plant based margarines.*
 - *Other sources of healthy fats include seeds, nuts, avocados.*
- Be aware that all fat, whether animal or plant based, is very high in energy (calories). Watch your total fat intake as high fat intakes are linked with increased risk of obesity.
- That are low in salt (sodium); if using salt, choose iodised salt.
 - High intakes of salt may increase your risk of heart disease, stroke, kidney disease and some cancers.
- With little or no added sugar.
 - Adding sugar increases the energy (calorie) content of food and drinks
 - A high or regular intake of foods and drinks with added sugar can lead to tooth decay.

Discussion

Fat

- A number of stakeholders commented that recommending minimal fat intake was not supported by recent evidence, which instead recommends replacing saturated fat with unsaturated fat in the diet, rather than a focus to decrease total fat. New Zealand data (2008/09 NZANS) has also reported New Zealanders' total fat intake falls within the recommended range, but saturated fat intake is still too high.
 - As a result the Ministry had changed the wording of the fat section of the statement to reflect this changed focus. The Ministry had also added a comment to statement that fat is high in energy whether saturated or unsaturated. This was to address concerns that the change could encourage people to eat more total fat because they think it is healthy, as well as in recognition that over half the adult population are overweight.
 - Some members thought that as statement 3 is about the type and amount of fat the comment related to its energy content didn't fit. May fit better in new comment re weight to cross both eating and activity statements.
- One stakeholder recommended avoiding all fats (including polyunsaturated fatty acids) and 'non-traditional oils' used in processed and deep fried foods.

Saturated fat

- Two stakeholders refuted the need to restrict saturated fat intake because it has little impact on cardiovascular risk.
 - The outcome of a significant discussion by the members on this issue was that the evidence still strongly supports recommendations to decrease saturated fat intake. Also all major western nations and the World Health Organization (WHO) continue to recommend restricting saturated fat intake. Specific graded evidence available from Australia and America as well as recent American and Nordic systematic reviews on dietary food patterns to support their guidelines. Recommendation to refer to NZ Medical Journal article (April 2014) by Mann for summary of evidence on saturated fat.
- The wording of this statement should be refocused to put positive (what people can do) points first. Also recommendation to remove terms 'plant based' and 'animal based' as not strictly correct and examples of saturated and unsaturated fats are provided to help people understand. Members recommended using Australian Guidelines wording for fats. Some members thought including examples of healthier cooking methods could be part of the 'how'.

Decisions

- Retain message to reduce saturated fat intake by replacing with unsaturated fats, and remove recommendation to reduce total fat intake as key message.

- Remove comment on the energy value of fat.
- Put positive messages first i.e. healthy fats first in Statement, followed by unhealthy fats
- Remove the terms 'plant based' and 'animal based'.
- Consider the Australian Guidelines wording on fat.
- Add healthy cooking methods such as steaming and grilling as part of the 'how'.

- Two options for updated statement:
 - i) Choose and prepare foods and drinks:
 - With unsaturated fats instead of saturated fats.
 - The body needs some fat, and the best type of fat is unsaturated which comes mainly from plants.
 - *Examples of healthy unsaturated fats include canola and olive oil and margarines.*
 - *Other sources of healthy fats include seeds, nuts, and avocados.*
 - High saturated fat intakes increase your risk of heart disease.
 - *Fat from animals as well as coconut oil and palm oil have a lot of saturated fat.*
 - ii) Australian Guidelines wording:

Limit intake of foods containing saturated fat, added salt, added sugars and alcohol

 - a. Limit intake of foods high in saturated fat such as many biscuits, cakes, pastries, pies, processed meats, commercial burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.
 - Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominantly polyunsaturated and monounsaturated fats such as oils, spreads, nut butters/pastes and avocado.

Salt

- One stakeholder questioned the need to recommend reducing salt intake as believes evidence supporting this is not strong.
 - The members thought it is important to reduce salt intake as small improvements in health individually are significant at a population level. Also key international organisations and countries continue to support reducing salt intake e.g. WHO in their Global Action Plan for the Prevention and Control of Non-Communicable Diseases 2013-2020 (WHO 2013); Nordic Guidelines.
- Discussion on whether to specifically include advice: 'do not add' to cooking at the table, like the Australian Guidelines.
 - Members generally not keen as most of salt intake comes from processed food rather than salt added at home. Also advice in statements includes food preparation.
- The members acknowledged the possibility for confusion re salt message as it is fortified with iodine, a mineral people need more of. Iodine issue could be explained in next layer of information on salt statement in core paper for practitioners.

Decisions

- No changes to current salt statement:

Choose and prepare foods and drinks:

- That are low in salt (sodium); if using salt, choose iodised salt.
 - High intakes of salt may increase your risk of heart disease, stroke, kidney disease and some cancers.

Sugar

Discussion

- Use the terms 'free sugars' and 'added sugars'.

Decisions

- No changes to current sugar statement:

Choose and prepare foods and drinks:

- With little or no added sugar.
 - Adding sugar increases the energy (calorie) content of food and drinks
 - A high or regular intake of foods and drinks with added sugar can lead to tooth decay.

Eating Statement 4:

Make water your first choice over other drinks

- The body needs water to survive and work well.
- Town supplied tap water in New Zealand is safe to drink and widely available. If you are not on a town supply check the safety of your water with your local council
- Plain water contains no energy (calories) so won't cause you to put on weight and is the best way to satisfy thirst.
 - *Limit high sugar drinks like fizzy drinks to treats only (for example, once a week).*

Discussion

- This Statement is fairly uncontroversial and doesn't need any amendment.

Decision

- No changes to current Statement 4.

Physical Activity Sub-group discussion on the Activity Statements

It was explained that the Activity Statements had been through limited stakeholder consultation and focus group testing and a re-drafted version of the activity statements had been provided to the TAG members.

- These statements reflected consultation feedback where appropriate.
- More weight was given to suggestions that received multiple comments.
- The statements were written in plain English where possible, but contained enough technical information that they were technically accurate and underpinned by evidence.

The Ministry has received permission from the Australian Department of Health to use the Development of Evidence-based Physical Activity recommendations for Adults (18-64 years) – August 2012 (the Australian Report) as the evidence base for the New Zealand activity statements.

Activity Statement 1:

Sit less, move more! Reduce sedentary behaviour and break up long periods of sitting.

- Sitting less can help you live healthier and longer.
 - *Stand up and move regularly throughout the day, at least every hour.*
 - *If you are watching television, get up during the ad breaks.*

- *If you sit a lot at work, get into the habit of getting up and moving at least every hour.*
- *See standing and moving as an opportunity, not an inconvenience.*

Discussion

- Whether the focus of Statement 1 should be narrowed so it relates only to breaking up sitting rather than standing and moving
- Whether the Statement “sit less, move more” will prevent people from doing it (because of the call to move) or whether it was a positive call to action.

Decision

- The level 1 statement is acceptable as presented.
- Make minor wording changes for the “why” and “how” levels.
- Add that sitting time being independent from physical activity levels should be added into the “why” level.
- The National Health and Medical Research Council (NHMRC) grade A/B evidence presented in the Australian Report is suitable to underpin statement 1.

Activity Statement 2:

Do at least 150 minutes (2½ hours) of moderate-intensity or 75 minutes (1¼ hours) of vigorous-intensity physical activity spread throughout the week.

- Moderate- and vigorous-intensity activities are great for the heart, lungs, and overall fitness and wellbeing. Examples of these activities can be found in Table X
 - *Moderate-intensity activities cause a slight but noticeable increase in breathing and heart rate.*
 - *Vigorous-intensity activities significantly increase breathing and heart rate.*
 - *You can achieve this recommendation by doing 30 minutes of moderate-intensity, or 15 minutes of vigorous-intensity physical activity on five days per week.*
 - *If you have been physically inactive for some time, are just starting out, or have certain health conditions you may wish to consult a health practitioner or physical activity specialist to ensure your safety before you start being physically active.*

Discussion

- The need to recommend that physically inactive people or those with a health condition need to visit a doctor before starting physical activity.
- Building physical activity into a daily routine so it becomes habitual should be inserted.

Decision

- This Statement is important, but flows better after the statements quantifying the amount of physical activity needed for health benefits and extra health benefits.
- Move this statement to Statement 4.
- Inclusion of the words whānau and friends is important.
- The NHMRC grade A evidence presented in the Australian Report is suitable to underpin Statement 4.

Activity Statement 3:

Aim to do at least 300 minutes (5 hours) of moderate-intensity or 150 minutes (2½ hours) of vigorous-intensity of physical activity for extra health benefits and to manage your weight.

- If you already meet the guidelines, increase the amount of physical activity you do for extra health benefits.

- *Double the recommended amount of time being active to reduce weight.*
- *Increase the intensity of your activity for other health benefits including XXX.*

Discussion

- The wording of the “why” section could be reduced by combining the statements on moderate-intensity and vigorous-intensity into one statement. The importance of spreading activity throughout the week is necessary in the context of this Statement.
- The sentence on combining moderate- and vigorous-intensity activity is redundant and self-explanatory so should be removed from the “why” section.

Decisions

- The level 1 statement is acceptable as presented.
- Move this Statement to activity statement 2.
- Move the examples given in the “why” section into the “how” section.
- Remove the sentence on combining moderate- and vigorous-intensity activity.
- The NHMRC grade for doing 2 ½ hours of physical activity was not given in the Australian Report. However, it was discussed that the evidence for this recommendation appears strong, and is consistent with evidence from the World Health Organization, the United States of America, the United Kingdom and Australia.
- The Ministry has contacted the Department of Health Australia to find out whether this was missing due to an error or because it is actually ungraded.
- The NHMRC grade B evidence for supporting activity being spread throughout the week as presented in the Australian Report is suitable to underpin statement 2.

Activity statement 4:

Include some muscle- and bone-strengthening activities on at least two days per week.

- Muscle and bone strengthening activities are important for keeping your body strong, lifting and carrying, and reducing the risk of falling or injury.
 - *Strengthen your muscles and bones with resistance activities such as walking up hills or stairs, yoga, Pilates, swimming, aerobics, heavy gardening or weight lifting.*

Discussion

- An overarching eating and activity statement on weight is needed.
- The current statement 4 doesn't take into consideration the importance of food in reducing weight.
- Evidence from the World Cancer Research Fund (WCRF) underpins the benefits of physical activity for prevention of some cancers including colon, postmenopausal breast, and endometrial cancer.
- The evidence for recommending 60 minutes of physical activity for weight loss is unproven. Sixty minutes of moderate-intensity physical activity relates to prevention of weight gain only.

Decision

- Move this statement to Activity Statement 3.
- The NHMRC grade A/B evidence presented in the Australian Report is suitable to underpin Statement 3 for extra health benefits such as reducing the likelihood of some cancers, but not weight loss.

Activity statement 5:

If you currently do no physical activity, start by doing some activity, and then build up to the recommended amount.

- Doing something is better than doing nothing. All physical activity you do counts towards the total
 - *Walk or cycle to work, the marae or church, play actively with the children, meet friends for a walk, do active jobs around the house*
 - *Incidental activity¹, active jobs², and active transport³ and all helps towards the total.*
 - *Build the activities into your daily routine that you are likely to stick to!*
 - *Consider joining a gym or sports club.*
 - *Set yourself goals to achieve.*
- Being physically active with others is good for your overall wellbeing and can motivate you to stay active.
 - *Being physically active with whānau is good for the hinengāro (mental and emotional wellbeing) of tangata.*
 - *Do a variety of activities with whānau and friends that you enjoy and want to keep doing.*

Discussion

- This statement was fairly uncontroversial.
- This statement is seen as a new concept by focus groups.

Decision

- This statement is acceptable as presented.
- Although the concept is new, it is important to include.
- The NHMRC grade A/B evidence presented in the Australian Report is suitable to underpin Statement 5.

Group discussion (Agenda item 7)

Full TAG discussion

Activity Statements

Activity Statement 1:

Discussion

- Whether the focus of the Statement is to reduce sedentary behaviour or to increase physical activity. This will have a bearing on the final statement wording.
- That less sitting time is more important for this Statement than moving which comes later.
- Questioned whether the “living longer” part is evidence based.

¹ Incidental activity is physical activity that you DO as part of usual daily living. Activities of Daily Living (ADLs) are important as they accumulate to help achieve the weekly guideline recommendations, and importantly reduce the time person spends being sedentary. ADLs include walking the dog, washing the car, gardening, and other household chores.

² Occupational activities are physical activities carried out as part of work. They can help prevent health conditions and enhance general health, and may count towards meeting the weekly physical activity recommendations.

³ Active transport is physical activity used as a mode of transport from one destination to another. It includes walking to the shops, cycling, scooting and skating.

Decisions

- This Statement is primarily about reducing sitting time.
- Remove phrase “living longer” .
- Remove “rather than a hassle”.

Activity Statement 2:

Discussion

- The nutrition group had used plain English throughout and the Activity Statements may be too technical as it talks about moderate and vigorous activity.
- The technical accuracy is beyond question and consistent with international jurisdictions.
- The Statement is fairly uncontentious.

Decision

- The Statement should stay the same as we need to balance the use of plain English with technical accuracy.

Activity Statement 3:

Discussion

- Both the nutrition and physical activity sub-groups thought it would be useful to have a combined weight statement.
- The evidence base for physical activity alone to reduce weight is patchy.
- The evidence base for physical activity to lower the risk of some cancers is good but we shouldn't list individual cancers.

Decisions

- Create a separate weight related joint overarching nutrition and physical activity statement . Remove the words “to manage your weight” from this Statement
- Remove individual cancer types from the Statement so it reads “lowers the risk of some cancers”.
- Use WCRF evidence base to underpin this Statement.

Activity Statement 4:

Discussion

- Green Prescriptions should go in this Statement
- The Statement should be framed positively like the others.

Decision

- Add Green Prescriptions to this Statement.
- Change wording to “doing some physical activity is better than doing nothing (or no physical activity).”

Activity Statement 5:

Discussion

- Consistent terminology should be used throughout the document with reference to tamariki, whānau and doctor etc.

Decisions

- The Statement is acceptable, but the whys and hows need to be checked for technical accuracy.
- Use Māori terms such as tamariki and whanau consistently, but also have the English version in brackets.
- Use the title 'doctor' instead of 'GP'.

Eating Statements

Discussion

- A brief overview of the nutrition group's discussion and decisions were presented on the Eating Statements to the whole TAG

Weight related statement

- Further discussion was had about the idea of replacing the separate weight related statements in both the Eating and Activity Statements with one statement that addresses both eating and activity.
 - Both Nutrition and Activity Sub-groups had separately come to the same conclusion re one joint statement.
 - This new "weight statement" should sit after the Eating Statements, but before the activity statements.
 - A few different sentences were discussed before the TAG settled on the new weight statement:

Decision:

- The new 'weight statement' which covers both eating and activity will be included after the eating statements and before the activity statements.
- Agreed wording:

'Food, drinks and physical activity are key to achieving a healthy body weight:

- A healthy weight:
 - Increases your chances of staying well and active
 - Decreases your risk of getting diabetes, heart disease and some cancers.
- To prevent excess weight gain and to lose weight:
 - choose nutritious foods which are low in energy (minimal fat and no added sugar)
 - drink water instead of sugary drinks and/or alcoholic drinks
 - reduce your portion sizes
 - sit less and reduce screen time
 - be as active as you can

Eating Statement 3 – fat

Decision

- Due to limited time the Chair suggested a video conference to talk about fat related part of Statement 3 including finalising the wording.

Eating Statement 3 – sugar

Discussion

- One member commented that we need to get wording right with regards to effects on dental

Decision

- Accept most of the current but review wording related to oral health.

Eating Statement 4

Discussion

- One member suggested removing comment on treats and quantifying the term 'limit' i.e. once a week, as no other quantities are provided in Statements.

Decision

- Remove as above.

Additional issue

Discussion

- Statement or part of statement regarding recommendations on processed food.
 - A number of stakeholders wanted a recommendation to minimise intake of processed food.
 - General recommendations on 'processed foods' are complicated as many foods we consider acceptable have had some processing i.e. bread, flour, frozen vegetables.
 - Need to be clear exactly what type of foods we are meaning. Some suggested using the term 'minimally processed' to describe an acceptable level of processing .
 - 'Ultra processed' is a term being used in some literature to describe high sugar, high fat, refined foods. (One paper describing 4 levels of processing may be useful so will be circulated with minutes).
 - Suggestion to re-consider issue once other suggested changes made to statements. Could address issue with use of examples.

Decision

- Re-consider issue once other suggested changes made to statements. Could address issue with use of examples.

See Appendix 1 for the statements revised as a result of this 2nd TAG meeting.

Other issues to consider (Agenda item 9)

TAG #2 – 11 June 2014

Minutes – for attendees approval

Current EAGS related work going on was highlighted:

- Eating and Activity Guidelines for Adult New Zealanders (the core paper)
- Guidance for Healthy Weight Gain in Pregnancy (for June 2014 publication)
- review of Ministry's current portion/serving size advice
- vitamin D statements (already published).

Considerations for prioritising further EAGS related work (in no particular order) are:

- overall EAGS project goals, for example, the ongoing timely release of publications:
- time since issue last reviewed
- new or changing evidence including international reviews
- opportunities arising e.g. relevance to current initiatives such as maternity and child health, *Healthy Families New Zealand*
- sector need, including gaps in current information
- government priorities
- resourcing.

TAG members were invited to suggest issues or topics for the EAGS that from their perspective should be prioritised, particularly related to new or changing evidence, and sector need.

- A TAG member suggested saturated fat as a possible topic for review. Concern expressed that the health sector and public may be getting mixed messages on this currently. The feasibility of such a review and importance of it being independent was discussed.

Round up and conclusion of meeting – (Agenda item 10)

TAG members were invited to:

- provide any further suggestions on priority issues or topics (Agenda item 9) to the Ministry after the meeting via phone or email
- to forward any conflicts of interest to the Ministry following the meeting.

The Chair officially closed the meeting and thanked everyone for their contribution.

Next meeting: A videoconference to review the statement changes as a result of the meeting and to finalise them will be arranged in the next one or two months.

Appendix 1 – revised statements post TAG 11 June 2014

Agreed wording for the eating statements following the meeting:

Overarching statement for Eating and Activity Statements:

- Three options are proposed:
 - i) 'Eating, drinking and physical activity are key determinants of health'.
 - ii) 'The amount and type of food and physical activity are key determinants of health'.
 - iii) 'What and how much you eat and drink, and your level of physical activity strongly effect (or shape or impact) your health'.

1. Enjoy a variety of nutritious foods every day

- Eating a range of foods helps you get all the nutrients you need from food to be healthy.
- Include:

- plenty of different coloured **vegetables and fruit**

- *e.g. broccoli, kumara, cabbage, fresh or canned tomatoes, carrots, green leafy vegetables, frozen green peas or beans, lettuce, apples, oranges, plums, feijoas, bananas.*

- a range of **grains and cereals** that are naturally high in fibre – go for wholegrain options as much as possible

- *e.g. wholegrain bread; wholemeal pasta, brown rice, wholegrain cereals like porridge and whole wheat biscuits*

or as per Australian GLs:

Grains (cereal) foods, mostly wholegrain and/or high cereal fibre varieties, such as breads, cereals rice, pasta, noodles, polenta, couscous, oats, quinoa and barley

- some **low fat milk products** *e.g. green or yellow top milk, low fat yoghurt; or calcium-added milk alternatives (non-dairy milks) e.g. calcium added soy or rice milk*

- some **legumes***, **nuts, seeds, fish, eggs, and/or poultry and red meat** with the fat removed.

**Legumes include cooked dried beans (e.g. baked beans), split peas (e.g. dahl), lentils and chickpeas (e.g. hummus).*

2. Choose and prepare foods and drinks:

- With unsaturated fats instead of saturated fats.
 - The body needs some fat, and the best type of fat is unsaturated which comes mainly from plants.
 - *Examples of healthy plant based fats include canola and olive oil and plant based margarines.*
 - *Other sources of healthy fats include seeds, nuts, avocados.*
 - High saturated fat intakes increase your risk of heart disease.
 - *Fat from animals as well as coconut oil and palm oil have a lot of saturated fat.*

Or Australian Guidelines wording:

Limit intake of foods containing saturated fat, added salt, added sugars and alcohol

- a. Limit intake of foods high in saturated fat such as many biscuits, cakes, pastries, pies, processed meats, commercial burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.

- Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominantly polyunsaturated and monounsaturated fats such as oils, spreads, nut butters/pastes and avocado.

Choose and prepare foods and drinks:

- That are low in salt (sodium); if using salt, choose iodised salt.
 - High intakes of salt may increase your risk of heart disease, stroke, kidney disease and some cancers.
 - With little or no added sugar.
 - Adding sugar increases the energy (calorie) content of food and drinks
 - A high or regular intake of foods and drinks with added sugar can lead to tooth decay
3. Make water your first choice over other drinks
- The body needs water to survive and work well.
 - Town supplied tap water in New Zealand is safe to drink and widely available. If you are not on a town supply check the safety of your water with your local council
 - Plain water contains no energy (calories) so won't cause you to put on weight and is the best way to satisfy thirst.
 - *Limit high sugar drinks like fizzy drinks.*

Single weight-related statement for eating and activity statements:

Food, drinks and physical activity are key to achieving a healthy body weight:

- A healthy weight:
 - Increases your chances of staying well and active
 - Decreases your risk of getting diabetes, heart disease and some cancer.
- To prevent excess weight gain and to lose weight:
 - choose nutritious foods which are low in energy (minimal fat and no added sugar)
 - drink water instead of sugary drinks and/or alcoholic drinks
 - reduce your portion sizes
 - sit less and reduce screen time
 - be as active as you can

Appendix 1 – revised statements post TAG 11 June 2014

Agreed wording for the activity statements following the meeting:

1: Sit less, move more! Break up long periods of sitting.

- Standing up more often can help your health, even if you are already physically active.
 - Break up the time you are sitting throughout the day for at least a few minutes every hour, preferably more.
 - See standing and moving as an opportunity.

2: Do at least 2 ½ hours of moderate-intensity or 1 ¼ hour of vigorous-intensity aerobic physical activity spread throughout the week.

- Aerobic activities are great for the heart, lungs, and overall fitness and wellbeing.
- You can achieve this guideline by doing at least 30 minutes of moderate-intensity or 15 minutes of vigorous-intensity aerobic activity on 5 days a week.
 - Moderate-intensity activities make you breathe harder but you should still be able to enjoy a chat while doing them e.g. brisk walking on flat ground, playing with tamariki (children), and dancing.
 - Vigorous-intensity activities make you breathe a lot harder and you won't be able to chat while doing them e.g. by walking fast or walking uphill, running, swimming or doing kapa haka.
- It is important that the physical activity is spread throughout the week.
 - Physical activity doesn't have to be done all at once – break it into smaller more manageable chunks.

3: For extra health benefits, aim for 5 hours of moderate-intensity activity; 2 ½ hours of vigorous-intensity activity per week or an equivalent combination of both.

- More time spent being active or increasing the intensity of the activity will provide extra health benefits such as increased fitness and reduced risk of some cancers.
- You can achieve this guideline by doing at least 60 minutes of moderate-intensity or 30 minutes of vigorous-intensity aerobic activity on 5 days a week.
 - High-intensity intermittent training (short periods of intense anaerobic activity with less recovery in between) is also time efficient and good for your weight.

4: Doing some activity is better than doing no activity.

- Make sure what you do is fun and build it into your daily routine.
 - Walk or cycle to places you might normally drive to, play actively with the tamariki, take the stairs instead of using the lift, do active jobs around the house, go fishing or gathering kai for dinner.
- Being physically active with whānau and friends is good for your overall wellbeing (and theirs) and can motivate you to stay active.
- If you have a health condition you may wish to consult your doctor or physical activity specialist before starting physical activity.
 - Talk to your doctor or practice nurse about a Green Prescription (GRx). A GRx is advice to you to be physically active, as part of your overall health management. It includes a written referral to a GRx coordinator who will support you to become more active.

5: Include some muscle and bone strengthening activities at least two days each week

- Muscle and bone strengthening helps to keep your body strong and reduce the risk of injury.
- Muscle strengthening requires pushing or pulling against a heavy object or weight which provides a force to stop you.
 - Strengthen your muscles with resistance activities such as walking up hills or stairs, digging in the garden, carrying the shopping or weight lifting.
- Bone strengthening requires doing activities that place impact on your bones
 - Strengthen your bones with impact activities such as walking, running, jumping, active sports.
- These activities can be done around the home, outside, in the community, or under the supervision of a trained professional at a gym or sports club.

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