



The New Zealand Health and Disability System Review

Submission on behalf of Doctors For Nutrition • May 2019

Doctors For Nutrition appreciates this opportunity to provide a submission in response to the [New Zealand Health and Disability System Review](#). We commend the aims of the review, which are to create a system that is better balanced towards wellness, access, equity, and sustainability.

Doctors For Nutrition is an Australasian health promotion charity led by medical and dietetic professionals from across Australia, New Zealand and globally. Our vision is a society and healthcare system that embraces nutrition solutions to help people optimise their health & quality of life. More information is available at doctorsfornutrition.org.

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1. What are the most important values for our future public health and disability system?

Prevention: Our future system will value keeping people well and invest in population health and prevention. Majority of the resources in our current system are targeted at treating disease rather than helping people stay well.

Nutrition First: Poor diet is currently the most significant risk factor for health loss in New Zealand. Our future system will have good nutrition as a foundational value and promote it through all levels and touch points. Emphasis of adoption of a whole food plant-based diet could dramatically reduce rates of obesity, type 2 diabetes, many cancers, and a range of other health conditions.

Lifestyle As Medicine: Evidence based lifestyle medicine will be at the heart of our future health system. Nutrition, cessation of smoking and reduction of alcohol, exercise, sleep, stress management and social connections are crucially important to health. Lifestyle is often the first line treatment in medical guidelines but its power is often underestimated by clinicians, managers and funders. There is a lack of awareness and education regarding optimal lifestyle interventions.

Environmental Health: Our future health system will value the health of our wider environment as being critical to human health. The Lancet Medical Journal has declared climate change as the most significant health threat to humans in the 21st century. We must treat it as such. The health of our species is also reliant on healthy water and air that we consume each day and healthy land and soil



from which our food is grown. A thriving environment is better able to nourish the physical and mental health of our populations.

2. Think about how the best health and disability system for New Zealand might look in 2030. How would that be different from the system we use today?

The best health and disability system for New Zealand will focus on health rather than disease and ability rather than disability. This includes upskilling our current workforce to provide basic nutrition and lifestyle advice and investing in preventative and public health interventions.

Healthy environments and culture will be embedded within the system. The food served within the health system, to service users and staff alike, will be nourishing and health promoting. Services will be provided within the community where possible and when people require more intensive care, the built environment will ease access for all.

Person centered care and supported self management will be prioritised. Education on healthy, sustainable diets is a core part of this - including cooking classes for all. The ability to prepare healthy meals is a lifetime skill that has the power to transform health for not just an individual, but families and communities.

3. What changes could make our health and disability system more fair and equal for everyone?

All clinicians should be trained to provide evidence based lifestyle advice to service users. Solutions need to be disseminated more effectively and in a culturally appropriate way. The health system must work with and within communities and engage local leaders. For example, the Blue Zone project cities are taking leaps to improve health across populations (see <https://www.bluezones.com/services/blue-zones-project/>).

We do not live in isolation here in New Zealand and our decisions affect people globally. According to the authors of the EAT-Lancet report, more than 820 million people do not have enough food to eat, while many more consume diets that, “contribute to a substantial rise in the incidence of diet-related obesity and non-communicable diseases, including coronary heart disease, stroke, and diabetes.” Furthermore, unhealthy diets are considered to be the leading risk factor for disease worldwide and, “pose a greater risk to morbidity and mortality than does unsafe sex, and alcohol, drug, and tobacco use combined.”



4. What changes could most improve health for Māori?

Poor diet is the most significant risk factor for health loss, followed by obesity. Maori are both less likely to achieve healthy diet targets and more likely to be obese. Improving diets and reducing obesity (and overweight) would have huge potential to improve health. Community interventions to support adoption of a healthier diet rich in whole plant foods are proven to assist weight loss, reduce blood pressure and reduce cholesterol - therefore reducing the risk of heart disease, stroke and diabetes. Subsidising fruit and vegetables and taxing 'junk foods' is an approach that would improve health outcomes and reduce costs to the system. Other lifestyle factors such as movement, stress management, promotion of social connections and sleep hygiene are also critical. Alleviation of poverty and socio-economic inequality is also critical as these factors are a root cause of poor health outcomes.

5. What changes could most improve health for Pacific peoples?

Poor diet is the most significant risk factor for health loss, followed by obesity. Pacific people are less likely to achieve healthy diet targets and more likely to be obese. Improving diets and reducing obesity (and overweight) would have huge potential to improve health. Community interventions to support adoption of a healthier diet rich in whole plant foods are proven to assist weight loss, reduce blood pressure and reduce cholesterol - therefore reducing the risk of heart disease, stroke and diabetes. Subsidising fruit and vegetables and taxing 'junk foods' is an approach that would improve health outcomes and reduce costs to the system. Other lifestyle factors such as movement, stress management, promotion of social connections and sleep hygiene are also critical. Alleviation of poverty and socio-economic inequality is also critical as these factors are a root cause of poor health outcomes.

6. What changes could make sure that disabled people have equal opportunities to achieve their goals and the life they want?

For equal opportunity, we must emphasise maintenance of ability and prevention of further disability. We need a system that provides healthy whole food plant-based meal options for those who are unable to prepare their own meals. This will significantly reduce the risk of lifestyle diseases such as obesity, heart attacks, diabetes and stroke that could further unnecessarily disable people. Alteration of the built environment to ensure it enables access for all is a priority and supporting people to use technology as appropriate. Focus on care early on



in diagnosis is important, as is providing tailored care close to home delivered by a skilled team.

7. What existing or previous actions have worked well in New Zealand or overseas? Why did they work, and how might they make things even better in the future?

The BROAD Study demonstrated substantial weight loss and improvement in other health outcomes including significant reductions in medication use in a community setting in Gisborne with adoption of a whole foods plant-based eating pattern (see <https://www.nature.com/articles/nutd20173>).

The CHIP program has also demonstrated significant improvements in the health of participants in New Zealand communities adopting lifestyle changes including a whole foods plant-based eating pattern (see <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3840335/>).

Kaiser Permanente is an American integrated managed care consortium which has recognized the health benefits of lifestyle change, particularly nutrition, and encourages and educates its physicians to prescribe a whole foods plant-based eating pattern (see <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3662288/>).

Dr Dean Ornish, after demonstrating patients were able to avoid revascularisation with lifestyle changes including a whole foods plant-based eating pattern, resulting in substantial savings for health care providers (see [https://www.ajconline.org/article/S0002-9149\(98\)00744-9/fulltext](https://www.ajconline.org/article/S0002-9149(98)00744-9/fulltext)), has had his program funded by numerous insurers and Medicare in the United States.

8. What are the most important changes that would make the biggest difference to New Zealanders?

Poor diet is the most significant risk factor for health loss, followed by obesity. Improving diets and reducing obesity (and overweight) would have huge potential to improve health. Currently less than 40% of New Zealanders achieve the conservative targets of three servings of vegetables and two of fruit per day. Approximately two thirds of our population are overweight or obese. These issues will not be solved by medication or surgery - a healthy lifestyle and good nutrition must be emphasised.

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9. Is there anything else you wish to add?

Doctors For Nutrition fully supports and strives to promote the enormous potential of whole food plant-based eating patterns to improve both population and planetary health. We would welcome the opportunity to further contribute to co-design of a health and disability system to optimise outcomes for all New Zealanders.