SELECTED NUTRIENT INTAKES OF ADULTS IN FOUR QUEENSLAND CITIES, AND A COMPARISON WITH AUSTRALIAN DIETARY TARGETS

J.H. PATERSON and P.W.J. HARVEY

The Queensland Health and Diet Survey 1989 (QH&D Survey), was organised by the Queensland Department of Health. Results from a subset of the data collected - on food frequency, food habits and alcohol intake from Brisbane, Cairns, Mackay and Townsville are presented here. Subjects systematically selected from the electoral roll from a sample stratified by electoral division were invited to complete a 115 item food frequency questionnaire, as well as to answer other health related and demographic questions. The NUTTAB90 food composition data base was used for nutrient calculations. Post-strata weights, calculated from the ABS 1990 estimates of age and sex data for each statistical division, were applied.

	18-29yrs		30-39yrs		40-49yrs		50-59yrs		≥ 60yrs		Total		Target
	М	F	M	F	M	F	M	F	M	F	M	F	(by 2000)
Energy (mJ)	11.0	7.91	9.62	8.39	9.20	8.01	8.14	7.60	8.96	7.37	9.67	7.76	
% Energy from total fat	33.3	34.6	32.9	33.4	34.0	34.1	32.5	31.3	32.1	30.5	33.5	32.8	≤ 33
% Energy from alcohol	3.6	2.9	5.1	2.9	5.7	3.6	6.1	3.0	4.8	3.5	4.9	3.2	≤ 5*
Fibre (g)	27.7	24.2	27.2	27.3	29.8	26.6	24.9	28.6	27.0	27.2	27.5	26.6	≥ 30
Sodium (g)	2.7	1.9	2.2	1.8	2.1	1.8	2.0	1.7	2.0	1.8	2.3	1.8	≤ 2.3

^{*} Referred to as alcoholic beverages in the targets

The table shows mean daily intakes of energy, fibre and sodium (from foods and beverages alone) and the % contribution to energy from fat and alcohol for 1383 males and 1306 females. Targets for improved nutrition were identified by the Better Health Commission Nutrition Taskforce (1987). The proportions of respondents (men and women respectively) failing to reach the specified targets were as follows: 57%, 57% for fat; 45%, 34% for alcoholic beverages; 69%, 71% for fibre; 43%, 22% for sodium. The nature of the NUTTAB90 dietary data base precludes estimation of contribution of refined sugars to dietary energy. Originally, the derivation of the targets was based on ABS apparent consumption data. Thus, comparisons with dietary survey data may be of questionable value. If the current trend to use dietary survey data to measure progress towards achieving Australia's dietary targets is to continue, a re-definition of the targets is required since it is not clear if mean intakes or a particular proportion of the population should reach such targets.

BETTER HEALTH COMMISSION (1987). "Towards Better Nutrition for Australians" Report of the Nutrition Taskforce of the Better Health Commission. (AGPS: Canberra).