The last fifty years have seen major changes in the way New Zealanders buy their food and the type of food we buy. Before the 'supermarket' people bought their food from markets or specialist

Student 1: Low Excellence

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food shops, such as greengrocers, butchers and fishmongers. The food was mostly fresh and unprocessed. As well as the fresh food Supermarkets today provide a wide range of ready to eat and processed foods specifically designed to reduce the time people have to spend preparing food. New Zealanders are eating more ready-to eat foods and supermarkets are contributing to this change in our eating patterns. The 'per cent total food spend' in 2000/01 for ready-to-eat foods was 12.2%. In 2003/04 it had increased to 12.4%. The 'per cent households 'purchasing for ready to eat foods in 2000/01 was 76.9%; it increased in 2003/04 to 81.4% (source: Household economic surveys 2000/01 and 2003/04).

Supermarkets sell "Meal solutions" designed to take the thinking out of food preparation; however in doing this they control the nutritional quality of what we are eating. Meal solutions include frozen ready-made meals that only take a few minutes to be reheated in the microwave; partially prepared meals – eg just add a packet or a bottle of sauce to meat; precooked meats; ready-made salads; hot meals from the deli. The convenience these foods offer encourages many of us to be less motivated to cook and increasingly less likely to make our meals from scratch. This could limit future generations' knowledge of food and limit their ability to cook and prepare healthy meals. If adults today are lacking this knowledge then it is likely their children will too. Children are influenced by what they are brought up with. So if parents have the attitude of valuing convenience over health, without thinking too much about the food choices they are making, their children will also have the same attitude towards food.

On the surface ready to eat food appears to be a quick and easy way to provide food for people with busy lifestyles. Dr Rosemary Stanton quotes; "supermarkets arrived in the 1960s... instead of walking to local shops with a list and asking for what you wanted, shoppers now drive to supermarkets and make their decisions according to the display on offer". Today we don't eat as many foods that are fresh and grown locally as we did in the past; instead we choose to eat ready meals because we have come to value convenience more than health. "At the supermarket, you exercise freedom of choice and personal responsibility every time you put on item in your shopping cart, but massive efforts have gone into making it more convenient and desirable for you to choose some products rather than others." Source: Marion Nestle 'What to eat'. Tactics include product placement - eye level is the prime spot for catching the consumers' eyes and incentive offers e. "buy one get one free" or "two for the price of one" promotions. Offering limits like "four per customer" also encourages consumers to purchase more. In store sampling is another strategy to get consumers to buy products they wouldn't normally purchase. The deli and bakery use sight and smell to grab interest and encourage people to buy products. (Consumer Report Supermarket Layout Tactics 2006)

Supermarkets don't make it easy for shoppers to choose healthier products or eat less food. Products come pre-packaged, consumers have no control over the portion size of food they buy, which is frequently more than they should consume. If asked, the average shopper would probably not know what a healthy portion size looks like for most basic foods and it suits the supermarket for them not to know. In a competitive market a way for supermarkets to increase profits is to get people to eat more. So food is sold in larger portions and in larger packets. The portion sizes recommended by manufacturers on food labels are not easy to compare because the portion sizes differ between different brands of similar food. The

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portion sizes of ready to eat foods is often determined by the sizes of the containers the supermarket provides and these sizes don't necessarily follow recommendations set out in the Ministry of Health food and nutrition guidelines; for example salads from the deli section. Studies show that the more food in front of you the more you will eat. Source: Marion Nestle 'What to eat'.

Also many ready to eat foods do not come with nutrition information labels, so even if a shopper took the time to read the label they still would not be able to compare products and make decisions based on the fat, sugar or salt content. When the ingredients are provided on packaging they are often made up of foods or additives eg. Dextrose, Stabliser, E450, E451, E452, that the average consumer would not recognise or understand. The Food and Nutrition Guidelines for Healthy Children and Young People (Aged 2–18 years): A background paper states "In general it seems consumer understanding of this information is poor which limits the value of nutrition labels as a tool for making healthy choices (Ni Mhurchu and Gorton 2007). Signal et al (2007) found Māori, Pacific and low-income New Zealanders rarely use nutrition labels to inform their food purchasing. Lack of time to read labels, lack of understanding and the relative absence of simple nutrition labels on lower-cost foods they purchase were some reasons given."

Eating too many ready to eat foods has a negative impact on health and New Zealanders are buying these foods regularly as part of their weekly shop. "The top 10 food and drink items sold in supermarkets nationwide in the year to January include four soft drinks (Sprite, Coke Zero and two different-sized bottles of Coca-Cola) and two brands of white bread. The full list of the 40 top-sellers tells a similar story, as buyers choose soft drinks, snack foods and confectionery." Public health nutritionist Bronwen King said the data shows the Kiwi diet has become too refined. "The things the companies say are occasional foods are becoming everyday foods, and are replacing traditional core foods." Source: Sunday Star times article 'Kiwis still hooked on the unhealthiest food' 22 February 2009.

Ready-to eat foods are typically high in fat, salt, and sugar. Foods high in fat, increases the risk of obesity and heart disease, eating too much sugar increases the risk of type-two diabetes and eating foods high in salt increases the risk of hypertension. Increased energy intakes from eating a diet made up mostly of ready- to eat foods has led to New Zealanders becoming overweight and obese. New Zealanders have the sixth-highest rates of obesity in the developed world. One in four adults are obese, and one in 12 children are obese. Twothirds of Pacific Island New Zealanders are obese. Statistics from MOH website. The lack of fibre in processed foods is also contributing to high rates of bowel cancer. While supermarkets do sell many low fat and fat free products consumers often are unaware of the high sugar levels in these products. Dieticians and nutritionists also recommend and support the use of low salt products to reduce our salt intake. Nutritionist Catherine Saxelby states in her Food Watch Fact Sheet that 75% of our salt intake comes from processed foods and says that buying salt reduced and no-added salt foods will have the biggest impact on our salt intake. However another issue with salt intake is linked to the loss of cooking food from scratch at home. Salt used in home cooking is enriched with iodine. "New Zealand soils are low in iodine, resulting in low iodine levels in locally grown foods. There has also been a decline in the use of iodised salt. As a result, studies have shown the re-emergence of mild to moderate iodine deficiency across most age groups in New Zealand. Even at a mild level, iodine deficiency can affect hearing, intelligence and mental capability." Source: http://www.nutritionfoundation.org.nz/nutrition-facts/minerals/iodine