



Assessing the cost of healthy diets in low socioeconomic groups in Australia



Healthy diets cost 12-15% less than unhealthy diets but are out of reach for many families

Low socioeconomic households need 30-60% of their income to buy a healthy diet



All households have similar rates of unhealthy food intake

Key messages

- Poor diet is a leading cause of preventable disease in Australia and around the world, however less than 4% of Australians consume a diet in line with the Australian Dietary Guidelines.
- Rates of diet-related disease in low socioeconomic groups (SEGs) are higher than in the broader Australian population.
- Price is a commonly cited determinant of food choice, and the affordability of healthy food is a key factor in people's food choices.
- For the first time, we measured and compared the cost and affordability of a healthy diet to that currently consumed across low SEGs in Australia using the Healthy Diets ASAP protocol.
- We found most low SEG households were at risk of food stress and healthy diets remained unaffordable for some. Low SEGs reported significantly lower intakes of healthy food and drinks yet similarly high overall intakes of discretionary choices to high SEGs.
- Eating fewer healthy foods may explain higher rates of diet-related disease in low SEGs. Permanently increasing welfare support and providing an adequate minimum wage would enable these households to afford healthy food, protect food security and ensure better diet-related health.

The project: Development and evaluation of a data collection method, and resultant policy recommendations, in relation to the price and affordability of healthy (recommended) and current (unhealthy) diets in low socioeconomic groups in Australia.

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Project start: January 2019 **Project end:** January 2022

Why is this issue important?

Poor diet is a leading cause of preventable disease in Australia and around the world. It is a major risk factor for many chronic diseases such as cardiovascular disease, type 2 diabetes, and some cancers. Although the Australian Dietary Guidelines provide dietary recommendations to reduce the risk of chronic diseases, less than 4% of Australians consume a diet in line with them. The average Australian family spends around 58% of food budget on unhealthy, discretionary and ultra-processed foods and drinks, which comprise around 38% of dietary energy intake.

People who are socially and economically disadvantaged have both poorer quality diets and poorer health outcomes. The price and affordability of food is an important factor in people's food choices and nutritional intake so it is crucial to ensure healthy diets are affordable in low SEGs, such as welfare-dependent households. Previous research assessing the affordability of foods in low SEGs has been based on the cost of arbitrarily selected healthy foods only, without comparison to the cost of current (unhealthy), habitual food consumption. This was the first study to assess the cost and affordability of the entire diet of low SEGs in Australia in terms of both the healthy (recommended) and the current (unhealthy) diets.

What did we do?

The [Healthy Diets Australian Standardised Affordability and Pricing \(ASAP\)](#) protocol measures and compares the cost and affordability of a healthy (recommended) diet to that currently consumed. This PhD project tailored the Healthy Diets ASAP methods to a low socioeconomic population to generate evidence to inform public health policy actions for improving food security, nutrition and diet-related health.

Six common household compositions among low SEGs in Australia were chosen for comparison with households in the other socioeconomic groupings. The project studied family structures including single parent households, single older women households, and households that rely solely on welfare income. The protocol was modified to reflect the needs and lived experiences of low SEGs, such as the inclusion of the prices of generic brand products and discount supermarkets. The pricing tool was also tailored to reflect the dietary intake of the lowest income households in Australia.

Six common household compositions among low socioeconomic groups in Australia



1. Man, woman and two children
(a 4-8 year old and a teenage boy)



2. Woman and two children
(a 4-8 year old and a teenage boy)



3. Older/retired couple (70s+)



4. Six people – man, woman,
teenage boy, two 4-8 year olds
and an older woman



5. Single male



6. Single older female

What did we find?

A systematic search of peer-reviewed literature since 2000 confirmed that overall, low SEGs spend a lower amount, yet a higher proportion of household income, on food and drinks than high SEGs. However, it was not possible to assess spending by 'healthiness' due to the non-health based assessments used in the literature.

This project assessed the cost of healthy (recommended) and habitual (unhealthy) diets in welfare-dependent and comparable Australian households, using either popular branded products or the cheapest available alternatives. Using the modified Healthy Diets ASAP protocol for this study, we found most households experienced food stress and healthy diets remained unaffordable for the families with children. Results confirmed that healthy diets were less expensive than habitual diets in almost all households. In some households if the cheapest available products were always selected, the healthy diets became the same cost or more expensive than habitual diets.

If low SEGs shop at discount supermarkets and always buy the cheapest option, such as generic products, affordability of healthy diets improves by around 31%, but unhealthy diet costs also improved by a greater amount of up to 36%. The resulting lower cost differential could aid perceptions that healthy foods are more expensive than unhealthy foods.

Using the methods of the Healthy Diets ASAP protocol to also analyse the dietary intake and habitual diet cost and affordability across household income groups in Australia shows low SEGs reported significantly lower intakes of healthy food and drinks yet similarly high overall intakes of discretionary choices to high SEGs. Lower intakes of healthy choices in low SEGs may help explain the higher rates of disease associated with diet compared to high SEGs.

Why does it matter?

Recommended diets have become increasingly unaffordable for Australian families on low incomes and in the current cost-of-living crisis, there is an urgent need for more welfare support to help households purchase healthy diets. If recommended diets were affordable for all, this would lead to improved workforce and social participation, improved education outcomes for children, reduced future health costs and reduced social inequality.

This project identified fiscal, public health, and nutrition policy actions that governments could undertake to improve food security, nutrition, and diet-related health in low SEGs. Continued monitoring and surveillance of healthy diet costs are required to produce real-world data for policy action.

Affordability of healthy food could be guaranteed by government commitments to help families access essential needs, and also by commitments to keep basic, healthy food and drinks GST-free. Additional health benefits would be delivered if GST on unhealthy foods and drinks was increased to 20% to further encourage healthier choices.

Permanently increasing welfare support and providing an adequate minimum wage would enable low-income households to meet the costs of living and afford adequate healthy food, to protect their food security and diet-related health.



What did we produce?

Publications

The following publications were produced as part of this PhD project. For a complete list of publications and other resources produced as a result of this ongoing research, visit the project page on our website, [Assessing the cost of healthy diets in low socioeconomic groups in Australia](#).

- Lewis M, McNaughton SA, Rychetnik L, Chatfield MD, Lee AJ. [Dietary intake, cost, and affordability by socioeconomic group in Australia](#). *International Journal of Environmental Research and Public Health*. 2021 Dec 17;18(24):13315. doi: 10.3390/ijerph182413315
- Lewis M, Lee AJ. [Dietary inequity? A systematic scoping review of dietary intake in low socio-economic groups compared with high socio-economic groups in Australia](#). *Public Health Nutrition*. 2021 Feb;24(3):393-411. doi: 10.1017/s1368980020003006
- Lewis M, McNaughton SA, Rychetnik L, Lee AJ. [Cost and affordability of healthy, equitable and sustainable diets in low socioeconomic groups in Australia](#). *Nutrients*. 2021 Aug 23;13(8):2900. doi: 10.3390/nu13082900
- Lewis M, McNaughton SA, Rychetnik L, Lee AJ. [A systematic scoping review of the habitual dietary costs in low socioeconomic groups compared to high socioeconomic groups in Australia](#). *Nutrition Journal*. 2020 Dec;19:1-2. doi: 10.1186/s12937-020-00654-5

To find out more about the Healthy Diets ASAP protocol, visit our website [here](#).



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