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Transcript: AMA ACT President, Dr Antonio Di Dio, ABC Radio Canberra, *Mornings with Adam Shirley*, Tuesday, 29 October 2019

Subject: World Medical Association's call for a sugar tax

ADAM SHIRLEY: I wonder if you do want to see a sugar tax to try and make people eat a little less, through produced foods, through sugary soft drinks? This call has been ramped up for many a year now by researchers, who have shown through some of their work it would make a positive difference to obesity rates, to your general wellbeing. And now the AMA - the Australian Medical Association - puts its unequivocal support to a call from the World Medical Association to introduce a sugar tax in a variety of settings to try and cut down our consumption of sugar in processed foods and in soft drinks.

Dr Antonio Di Dio is the ACT branch President of the AMA. Dr Di Dio, good morning to you. How significant is it that your organisation has said yes, a sugar tax is what we need?

ANTONIO DI DIO: I hope it is of some significance, Adam. We think that, as a public health policy, it's a very good idea and have been certainly prosecuting that agenda since our previous Federal President, more than probably two years ago. That is, as far as public policy goes, a very reasonable, and measured, and intelligent thing to do.

ADAM SHIRLEY: And this World Medical Association statement sets out in plain terms that a sugar tax is recommended and would cut rates of obesity and improve health outcomes. How strong is the case compared to even a year or two ago- or that previous campaign you mentioned?

ANTONIO DI DIO: Look, I think every year the data becomes more convincing. Obviously, you never know if a public health policy is going to work until you try it. But you do have the kind of modelling that would make it very, very, very likely that it would have some good effect. We know also from public policy for over many decades that some things have worked very, very well. Seventy-six per cent of Australians smoked at the end of World War 2, it's now about 17 per cent. And it's consequent in great part to a combination of public education, as well as to pretty heavy taxation.

ADAM SHIRLEY: So, if there is this compelling evidence in the AMA's eyes, why is it there is a resistance, or at least a caution on introducing a firm tax that's universally applicable in Australia?

ANTONIO DI DIO: Adam, there are two very good reasons for that. The first is the commercial imperative. For not just years, but for decades, cigarette companies campaigned against education about cigarette damage because it affected their profits. And soft drink manufacturers are certainly not like they were in the late 70s, when I lived in a country town and I had a job as a 10-year-old working at the local cordial factory. Local cordial factories don't exist, soft drinks are manufactured now by very large multinationals with a lot of power and authority. And if I was them, I would certainly not want people impinging on my profits because of their health agenda.

Secondly, there are cultural reasons. Adam, one of my favourite back pages of any newspaper was the *Sydney Sun* in 1970, when the Sydney Cricket Ground for the Test match decided to limit the amount of grog you could bring into the ground to one case per person. And the headline was an entire page that said: “Wowsers destroying the game”, because you could only take 24 beers into a game.

So firstly, there are financial imperatives from big corporations. And secondly, there are cultural changes that need to be discussed and evolve over time. But I think that a very sensible and measured and targeted sugar tax would be welcomed by the vast majority of people, and result in some better health outcomes for Australians.

ADAM SHIRLEY: So, as you've alluded to alcohol campaigns and restrictions on amounts you could drink at the SCG, what lessons can be learned there to try and convince some of the public and the decision-makers that a sugar tax should come in?

ANTONIO DI DIO: Well, I think there is very, very compelling evidence in relation to a number of health outcomes and parameters, such as lung carcinoma and chronic air flow limitation, that the reduction in smoking over the years - not in all demographics, for example, teenage girls' smoking has increased a little bit over the recent years - but in the vast majority of demographics, the reduction of smoking has resulted in the improvement in a lot of different health outcomes. And similarly, we see that experiments such as reduction of alcohol consumption after hours in parts of Sydney has resulted in some improvements in some measurables [indistinct].

So, I think that all of the data that you collect when you make these changes is filtered through the prism of some people like me, who are only interested in the good health of Australians, and some people like other interest groups who might have their own agenda to drive.

ADAM SHIRLEY: Dr Antonio Di Dio, our guest at the moment. He's the President of the ACT branch of the Australian Medical Association. At six minutes to 10. Mike asks, if the sugar tax was brought in, where would the money go and what would it be used for? Who would monitor the use of such funds? What would your idea be on that, Dr Di Dio?

ANTONIO DI DIO: Well, I remember about 15 years ago, there was a three by three tax, I think it was three cents per litre for three years on petrol, that was- and that tax was going to pay for better roads. And I may remember the scheme correctly, but I think there was some argument about the tax just going to consolidated revenue rather than getting into roads. So, I think that if we should have sugar tax, whatever revenue was raised should be spent on health.

ADAM SHIRLEY: Health funds. Okay. Public health funds, I mean, going to hospitals and GP services, and all the rest of it.

ANTONIO DI DIO: Absolutely.

ADAM SHIRLEY: Okay. We'll see if this World Medical Association statement and the AMA's support of it does make a difference to the ongoing discussion around sugar taxes in the

ACT and in Australia. Thank you for your time today. Dr Antonio Di Dio, President in the ACT of the Australian Medical Association.

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