

MEN'S HEALTH

PEER EDUCATION MAGAZINE

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VETERANS' HEALTH WEEK NUTRITION EDITION

How important is food
to your health, fitness
and wellbeing?

The benefits of bush tucker

A veteran's weight loss
and wellbeing journey



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EDITORIAL



WELCOME TO THE VETERANS' HEALTH WEEK NUTRITION ISSUE

As I write this editorial, I am remembering the last time I looked at myself in a full-length mirror and noticed an expanded waistline. I told myself that as it is winter, it is okay to put on a few extra kilos. When the temperature drops, many of us struggle to eat well and to find the motivation to stay fit. I know how tempting it is to stay indoors where it's warm, eating comfort food and avoiding exercise of any kind.

When the nights draw in and the temperature falls, many of us fall prone to colds, illnesses, the blues, a sense of isolation and winter weight gain. The good news is that by making changes to my present diet to include a range of foods as recommended in the Australian Dietary Guidelines and incorporating exercise into my daily routine I will be on my way to shedding the unwanted winter kilos ready for the warmer weather.

In this issue of the Men's Health Peer Education Magazine there are plenty of articles to inspire us to take charge of our health and wellbeing.

Catherine Spooner
Men's Health Peer Education



LETTERS TO THE EDITOR

What we're looking for...
Letters should be no more than 100 words and relate to articles or topics discussed in the magazine or regarding men's health generally.

PLEASE SEND YOUR LETTERS TO THE EDITOR
menshealth@dva.gov.au or c/- Department of Veterans' Affairs, Men's Health Peer Education Magazine
GPO Box 9998, Brisbane QLD 4001

MHPE MAGAZINE AND REPRODUCTION OF CONTENT

Just a reminder to our readers, if you would like to include an article that's appeared in an edition of the magazine in your own publication, please contact the Editor to confirm if there are any restrictions on the re-publication of the material.



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Open Arms

CONGRATULATIONS TO OUR MHPE VOLUNTEERS

Each year, we recognise MHPE volunteers by awarding certificates of recognition and badges for 5, 10 and 15 years of service. These awards are made during National Volunteer Week in order to acknowledge the value of volunteering within the broader Australian community. I would like to congratulate those volunteers who will achieve 5, 10 and 15 years of service and thank them for all their hard work, enthusiasm and ongoing support of the program.

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NUTRITION FOR LIFE



As I get older, I've come to realise how wise my grandmothers were – and in particular, their dietary advice about 'Eat everything in moderation'. And after 40 years in medicine, I now know this to be the truth. But the other thing that our grandparents did was that they worked physically hard – and they walked everywhere.

This exercise plus eating moderate quantities of fresh, home-cooked, whole foods and a lot of seasonal fruit was what defined those generations. And they mostly ate at home, with the family, while seated at a communal table rather than snacking or watching TV.

Obesity was uncommon, Type 2 diabetes was almost unknown, and there seemed to be lower prevalence rates of chronic diseases including many cancers and coronary artery disease. And this was at a time when a very large proportion of men smoked cigarettes!

Today, smoking rates have thankfully plummeted, but people are exercising less, many seem to be overeating, and in particular, consuming very high saturated fat, high calorie take-away foods. Plus

sweetened soft drinks have loads of sugar, and many fruit juices not only have lots of calories, but also do not contain dietary fibre. This fibre is a very important part of helping to slow the absorption in the gut of food to avoid the sugar hit and the resulting over-release of insulin. Many of our lifestyle dietary choices are now directly contributing to metabolic syndrome and pre-diabetes.

Rather than focus on lifestyle and diet, many veterans and their families hope that taking expensive multivitamin pills and/or fancy yoghurts containing probiotics will help. The truth about multivitamins is that they are a waste of money, except in very rare cases where there is a bona fide deficiency or a malabsorption syndrome (or where other prescribed medications might reduce the uptake of essential vitamins from our food). Vitamins taken in excess of the tiny amounts we need daily for efficient metabolism end up being excreted in the urine and the faeces. As a developed country, Australia has some of the most vitamin enriched sewage in the world!

I am not saying that all vitamin supplements are bad. There is a place and a need for vitamin supplementation in certain chronic medical conditions, and particularly among

some of our older veterans whose diets are poor, and especially if they have chronic non-healing leg ulcers, wounds or bed sores. In these cases, just fixing the diet is not enough. In addition to the required amounts of key vitamins (especially Vitamin C which is essential to collagen formation in wound repair), some other trace elements such as arginine may also be needed, and it is almost impossible to get enough of these chemicals from the normal diet if the body's stores are already depleted due to chronic disease or non-healing wounds.

If you or someone you care for is in this predicament, talk to your doctor or community pharmacist about whether a special prescribed nutritional supplement called ARGINAID may be helpful. This is a 'medical food' that contains arginine, vitamin C and other special ingredients that can be prescribed for veterans and other entitled persons on the Repatriation Pharmaceutical Benefits Scheme (RPBS). There are multiple flavours available, and these supplements can work miracles in helping to heal long-term non-healing wounds (allied with good nursing, optimal wound care, pressure bandages, and so on).

Many veterans would also be aware of the increasing evidence that the right mixture of 'good' and 'bad' bacteria in our gut is essential not only for good digestion and absorption of essential nutrients from our food, but can also have very significant beneficial effects on our mental health. Courses of prescribed antibiotics may

be necessary for the cure of other conditions, but one of the unwanted consequences is that there may be very significant negative changes to the natural balance of bacteria in our gut. I suggest you ask your doctor about this if she/he wants to prescribe antibiotics. There are ways to restore these bacteria, including by 'faecal transplants' – but I won't go further into this subject in a family magazine!

Another area of current research is around whether we can slow down the ageing process by changing our diet. Certainly in animals there is convincing evidence for this – but the results are only significant when they are severely calorie restricted. Few people can tolerate this degree of 'near starvation' for any length of time.

Finally, one of the significant areas of current research is whether through diet, we can modify the chances of developing some of the neuro-degenerative diseases associated with ageing such as Alzheimer's and the other dementias.

These conditions will become an ever-increasing problem among our veteran community as we have more and more veterans and war widows surviving to the ages when these kinds of conditions become common. At present, there is only very limited evidence that diet by itself can positively reduce the risks of developing dementia. However, there certainly is strong evidence in relation to the protective benefits of regular exercise in warding off cognitive decline. Good social interactions and maintenance of

an active inquiring mind will also help. Although the evidence in relation to 'brain training', doing crosswords or playing chess or Sudoku is limited, these activities will certainly do no harm.

From a medical perspective, there is however good evidence that another 'medical food' called SOUVENAID may help to slow the development of early dementia. Unfortunately it is of no use in established dementia. Prescription of this medication is available under our RPBS / Prior Approval Scheme to veterans and other eligible persons where there is a clinical need. I suggest that you talk to your doctor, geriatrician or other specialist as to whether this is something that might be helpful in your particular case.

Until next time!

Dr Ian R Gardner
Chief Health Officer / Principal
Medical Adviser

MEDICINES ARE THERE TO BE TAKEN



Not taking your medicines as prescribed? You're not alone. Recently, a friend called me for advice. She had been started on an antidepressant medication and was feeling nauseous and tired. She wanted to stop taking it.

Every day, we make choices by weighing the potential benefits of a decision against the risks or negatives. I'd like a new car, but can I afford it? I've been asked to go to the beach this weekend but is it worth upsetting a friend who previously organised to catch up for dinner? And yet, when it comes to our health, we often don't recognise that the positives of taking medicines as directed outweigh the negatives.

Non-adherence to medicines is common in people with chronic disease and or taking preventative medicines. It is estimated that up to one half of all prescriptions are either not taken correctly or at all. And more than one in five people do not fill their prescriptions. Non-adherence can be intentional, unintentional, or both.

People with 'silent' health conditions that don't have symptoms are most at risk of non-adherence. Hypercholesterolemia (high cholesterol) doesn't cause pain, fatigue, nausea, or any symptoms. So why take a statin drug every night? And why take drugs for hypertension, when high blood pressure causes most people no symptoms? And who wants to take tablets to prevent bone fractures when they might make you feel nauseous?

Well the reality is: hypercholesterolemia doesn't hurt ... until you have a stroke. Hypertension doesn't hurt ... until you have a heart attack. Osteoporosis doesn't hurt ... until you fracture your bones. If you want to give yourself the best shot at enjoying your life, take your medicines!

Some medicines need to be taken with or without food or at a certain time of day to get the most benefits. And, if you don't like the way your medicine makes you feel, speak to your doctor. All medicines have possible side effects. Some are common and may go away with time; some are more concerning and you may need to change your medicine. There's a very good chance there is another medication that will help without any problems.

Many of us can get confused by the number and range of medicines we have to take. Drug Administration Aids (DAAs) can be helpful if you are prescribed many medicines. They sort your tablets into various compartments according to the day of the week and the time of the day you should take them. DVA provides free pharmacy-packed DAAs to eligible veterans. So, if you think a DAA will help you, you might like to talk to your doctor about this free service.

So, to get back to my friend, I explained to her that she could feel nauseous and tired initially, but these symptoms would most likely subside over time. If the symptoms did not decrease over the next few weeks, she should return to her doctor and discuss it. Six weeks later, my friend is feeling much better and enjoying life. The nausea has gone and she no longer feels tired.

So, to stay healthy with medicines, always take them as directed and be informed. Ask your pharmacist and doctor questions about how the medicine will help you, how long you need to take it for and for any special instructions on how to take it. Enjoy life and the great pleasures that come with it!

Margaret Bowen
DVA Pharmacist Adviser

What are you having for dinner?



A brisk walk from the tram is a good antidote to the day sitting in front of a computer screen and a walk with the dog to get that doggy business out of the way also is a good idea. I don't need to look at my watch. I know when five o'clock arrives as my dog gives me her unblinking fixed stare. Like clockwork, she gets up from her cushion and says, it is time for my dinner. It is not only her dinner time, but it is also the hour when for some reason it is time to relax and have a couple of drinks.

It is sometimes hard to stick to the rule and say enough is enough, and common sense does not always prevail. Alcohol has a role but like most things it should be consumed in moderation. I prefer having a nibble with my glass of wine and against better judgment my wife has a habit of bringing out the sea salt chips, with my dog in the wings waiting for her share. I don't always win this argument as it's two against one. But we should forget the salty chips and nibble nuts.

What's for dinner is always the challenge. Speaking from a healthy nutritional perspective, a variety of foods is the name of the game. Fresh fish or seafood mix from the market should be on the menu at least twice a week and this can be cooked in different ways. Chicken is always an option and fillets are probably the best. Red meat is fine if it's lean or trimmed. I am always tempted to secretly steal some of the fat. Bad fat at that, saturated fat. The dog is always hovering for the same bits. What is bad for me is bad for the dog.

There are good fats and bad fats and the worst fats are trans fats. These are found in some vegetable cooking oils and a range of foods including cakes, burgers and chips and donuts. It is worth avoiding these fats and use olive oil in our dressings and cooking.

Should we have vegetables or salad to complete the meal? Perhaps cold weather favours vegetables and plenty of them. An avocado salad with wild rocket, chopped apple with walnuts or a crunchy Afghan salad (SALATA) is favoured by diabetics. Sounds equally good. Olive oil, nuts and avocados are cardio protective. That should be enough, but of course we could have had pumpkin soup with ginger, or baked apple for dessert. Certainly no donuts and cream.

In simple terms, good nutrition is about having a variety of foods, eating regular meals including whole grains, fibre, fruit and vegetables and limiting the amount of fat, sugar salt and alcohol. How you generally follow these guidelines without losing the fun of eating is up to you. Therein lies the challenge. But for your health and the health of your family this is a challenge worth considering.

What are you having for dinner?

Dr Graeme Killer AO
Medical Adviser

SEVEN WAYS TO LOWER YOUR BLOOD PRESSURE



High blood pressure is called the silent killer. That's because it has no symptoms. Having high blood pressure (hypertension) increases your risk of heart disease, stroke, heart failure and kidney disease.

Six million Australian adults (34 per cent) have high blood pressure. Of those, four million have high blood pressure that isn't treated or under control.

There is some good news. High blood pressure can be treated or prevented. Eating oats, fruit and vegetables – and beetroot, in particular – helps. So does avoiding salt, liquorice, caffeine and alcohol.

The first blood pressure number, which is the pressure at which the heart pumps blood, is systolic blood pressure, while the second number, which is when the heart relaxes, is diastolic blood pressure.

Optimal systolic blood pressure is 120 mmHg or less, while the optimal diastolic blood pressure is 80 mmHg or less. Lowering it by 1-2 mmHg can have a big impact on reducing your risk of heart disease and stroke, and the nation's health care costs.

What to eat

ROLLED OATS

To improve your blood pressure, eat rolled oats or oat bran for breakfast, add to meat patties, or mix with breadcrumbs in recipes that call for crumbing.

Recommended minimum daily adult fibre intakes are 30 grams for men and 25 grams for women.

While some of fibre's effect is due to weight loss, soluble fibres produce bioactive products when they're fermented in the large bowel. These work directly to lower blood pressure.

BEETROOT

Beetroot is extremely rich in a compound called inorganic nitrate. During digestion, this gets converted into nitric oxide, which causes arteries to dilate. This directly lowers the pressure in them.

Try wrapping whole fresh beetroot in foil and baking in the oven until soft, or grate beetroot and stir-fry with red onion and curry paste and eat as a relish.

VITAMIN C

Vitamin C, or ascorbic acid, is found in fresh vegetables and fruit. An average serve contains 10-40mg of vitamin C.

However, those at risk of kidney stones need to be cautious about taking vitamin C supplements. Excess vitamin C is excreted via the kidneys and can contribute to the formation of kidney stones.

One advantage of getting more vitamin C from eating more vegetables and fruit is that you boost your potassium intake, which helps counter the effects of sodium from salt.

What to avoid

SALT

High salt intake is associated with higher blood pressure.

Adults need between 1.2 to 2.4g of salt each day (one-quarter to a half teaspoon).

But in Australia, seven out of ten men and three in ten women eat way more than that – and much more than the upper recommended limit of 5.9 grams of salt (about one teaspoon).

If you add salt to food yourself this pushes your sodium intake even higher.

Avoid foods high in sodium. Don't add salt and try to choose lower-salt versions of processed foods.

ALCOHOL

Consuming one or more alcoholic drinks a day is associated with systolic blood pressure that is about 2.7 mmHg higher than non-drinkers, and diastolic blood pressure that is 1.4 mmHg higher.

Interestingly, when you first drink an alcoholic beverage, blood pressure goes down, only to rise later.

The bad news is that larger amounts of alcohol increase your risk of high blood pressure, especially in men, but also to a lesser extent in women.

LIQUORICE

High blood pressure due to eating black liquorice is rare, but case reports have occurred.

Most liquorice candy sold currently contains very little true liquorice root and therefore, little glycyrrhizic acid (GZA), the active ingredient.

Occasionally, liquorice candy does contain GZA in large amounts. GZA causes sodium retention and potassium loss, which contributes to high blood pressure.

So check liquorice food labels. Take care if it contains liquorice root.

CAFFEINE

Caffeine is most commonly consumed in coffee, tea, cola and energy drinks. High intakes of caffeine from coffee increase blood pressure in the short term. So you need to monitor your individual response to caffeine.

Originally published in The Conversation

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Hunter Medical Research Institute

TOO BUSY TO LOOK AFTER YOURSELF?



6 quick tips for your health

MAKE BREAKFAST COUNT

It is often said that breakfast is the most important meal of the day. So, how are you starting your day?

Research shows that eating breakfast is linked to being a healthier weight and burning more energy during the day.

Replace 'empty' breakfast choices with nutrient-rich breakfasts such as muesli or bircher muesli with yoghurt; egg, spinach and tomato on wholegrain toast; or a smoothie with berries, ground seeds and nuts.

DON'T FUEL THE FIRE

Today, inflammation appears to be the basis of all non-infectious diseases.

Decrease the fire of inflammation by eating foods rich in omega-3 fats such as oily fish (sardines and salmon) three times a week, as well as linseeds (flaxseeds) and walnuts.

Use healthier fats such as olive oil and macadamia oil and avoid the more inflammatory oils such as safflower oil, sunflower oil, grapeseed oil and many vegetable oil blends.

RED IS THE NEW BLACK

Red, blue and purple foods are rich in antioxidants and anti-inflammatory nutrients. This means they can help fight disease and keep you healthier.

Fruits: berries, cherries, plums (and prunes), blackcurrants, red apples and black grapes.

Vegetables: purple and orange carrots, purple and red potatoes, red cabbage, red onions and red lettuce.

Grains and legumes: red rice, red kidney beans, aduki beans and red lentils.

For simple, nutritious and delicious recipes to cook and enjoy, visit the Jean Hailes Kitchen at jeanhailes.org.au

LOVE YOUR GUT BUGS

Your gut contains more than 1000 different types of bacteria - useful bacteria that help you absorb more nutrients from food and protect you from illness and allergies.

New research shows that gut bacteria can also influence behaviour such as anxiety and depression.

Nourish and restore your gut bugs with whole plant foods. Go for fruit, vegetables and nuts, wholegrain rice, oats and rye, and legumes such as beans, chickpeas and lentils.

MIND FULL OR MINDFUL?

We often try to pack a lot into our days, but have you thought about making time for mindfulness?

Mindfulness is a great way to calm yourself down, reduce anxious thoughts and feelings, and help you stay in the present.

This can make coping with everyday life easier and contribute to good health and wellbeing.

FLICK THE SWITCH

Most women need 7-9 hours of sleep a night.

The light from your phone, tablet or laptop negatively affects the production of your sleep hormone melatonin, so wind down in the evening without using technology.

Switch off your devices at night and keep your phone out of your bedroom so you can switch off properly too - that means no alerts, no checking your phone and not using your phone as your alarm clock.

eating in the slow lane



Remember the days of long lunches with friends and family, having time for a chat and a cup of tea with a neighbour, savouring a good meal with your partner? For some of us this is a long-lost art that has only been glimpsed in recent years. What we eat is very important, as is the portion size. However, food is much more than just the nutrition we need to live; it is a way of life, a way to connect with others and to nurture our souls.

Some cultures are very good at preserving these principles in the ceremonies that have endured for centuries: think the Korean tea ceremony, which is experiencing a revival as a way of bringing harmony and relaxation to an otherwise busy schedule, and the Italian culture that is known for a love of food, wine and big family gatherings.

As a child of Italian parents, I have grown up with really good food fresh from the garden, fresh eggs and fabulous pasta, so I am rather biased here!

Globally, grassroots movements have developed as a consequence of a sense of disconnection with the source of food production. There is a growing realisation that this has blunted our ability to connect with the deep contribution food makes to our lives as a source of both physical and spiritual nourishment. As a result, there has been a resurgence of backyard gardens, chook-pens, community gardens and composting. It is as if people are realising that they have lost something valuable, even sacred, in their lives and are re-establishing that connection at the rate of knots.

The Slow Food movement is one example of a global grassroots organisation that has gone from strength to strength since its inception, in 1986, by Italian food activist Carlo Petrini. The movement's vision is the creation of a world in which all people can enjoy food that is good for them, good for producers and good for the planet. It supports good food, gastronomic pleasure and a slow pace

of life, facilitating a richer quality of life and the sustainability of the planet. The philosophy of the Slow Food movement uses food as a vehicle to live our lives as well as possible, using available resources without wasting them.

The organisation has about 100,000 members, with more than 1300 'convivia' (local groups) in 160 countries. Slow Food coined the term 'co-producer' to highlight the power of the consumer and believes that informed, selective consumers become co-producers by demanding food that is good, clean and fair.

Each convivium gathers regularly to share meals of local food, building relationships with producers, campaigning to protect traditional foods, organising tastings and seminars, encouraging chefs to use local foods, choosing producers to participate in international events and promoting taste education in schools.

Food and nutrition, like life itself, is more than just the sum of its parts. We know that as social beings, being connected to others for a cause greater than ourselves delivers significant benefits to us as individuals in terms of good physical and mental health and as a society in terms of thriving, energised communities that collectively make up a human race worth saving.

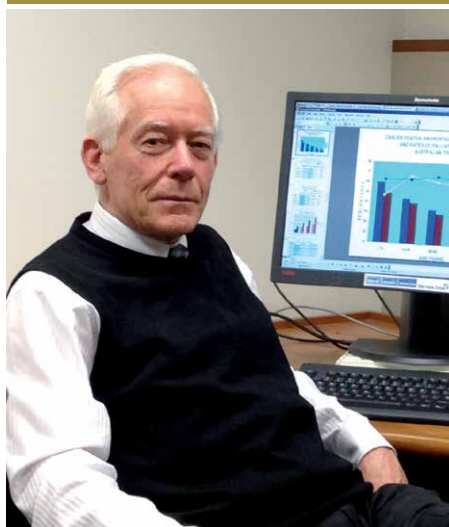
TO FIND OUT MORE:

Visit the Slow Food Australia website (slowfoodaustralia.com.au) to find a local convivium near you and to read more about the organisation. For more information, email info@slowfoodaustralia.com.au or 'like' their Facebook page to keep up to date on events near you.

Berry, W, 'The pleasures of eating', in *What are People For?*, North Point Press, San Francisco, 1990

Loretta Poerio
DVA's Mental Health Advisor

SOUL FOOD: MAKE MINE ORGANIC



A long time ago, I played on church organs for many years, mostly with more spirit than skill. Occasionally it all came splendidly together – Christmas morning with a full house, or accompanying a trumpeter at a wedding.

At one point, my garage was home to a very large organ that would not have looked out of place in a cathedral or a Hammer Horror film. But hey! It was great fun. And lots more than just fun. The physical and mental gymnastics of driving a beast like that have been likened to those of flying a Jumbo, and without a co-pilot. The moments of mastery were brief and fleeting, but all the more uplifting for that.

Then, 25 years ago, a parting of the ways with churches and a shift of address saw the departure of organ playing from my life. And while freed from battling something I could never master (golf anyone?) I have missed it – the technical challenge and the spiritual involvement. Spiritual? Well a nun once explained to me that spirituality was not the same as religion; in fact the two often pointed in different directions.

Now approaching pre-dotage, and in reasonable physical shape due to good fortune and a good diet, I realised that my menu was lacking in soul food. Listening to other people make music was only partly helpful – an entrée at best. Taking up the guitar or the recorder was not going to cut it after playing something that could generate 800 watts of harmonic thunder, or murmur gently at my chosen touch.

A few weeks ago, a local church agreed to let me do some practice on their (reasonably beast-like) machine. In return I had to agree to play for the occasional service. It has been a daunting period of mostly clumsy bumbling and mounting sweatiness as the deadline approached. My solitary hours in the chapel were occasionally tainted by some decidedly un-liturgical comments. I felt so far from being uplifted that the spirit-level would not even register.

Why bother? There were plenty of other things to painlessly enjoy, and lots of stuff – like writing for DVA – to keep the neurones ticking over. My new and skilful physiotherapist has even improved my crook knees and dodgy back to the point where he is actually prescribing a return to the golf course. So there could be other challenging battles, and perhaps the ecstasies of a successful 10-foot putt might fill the void. Perhaps.

A roast lamb or chilli mud crab dinner like mum used to make, eaten with a favourite beverage can 'hit the spot' like nothing else. Away from the table, I suspect that all of us have a few activities or experiences that can hit the sweet spot of the inner self. A lack of proper food will eventually result in evidence of poor physical health. And the new wonder world of the genome and the microbiome tells us that what is a proper diet for me may be decidedly unhealthy for you.

So with the mind, and dare we say, the spirit or soul. Without experiences that hit the sweet spot of our particular spirit, we can become less spirited, with old-age grumpiness and poorer general health not far behind. Finding or regaining something that makes us satisfied and uplifted, just sometimes and just a bit, might do wonders.

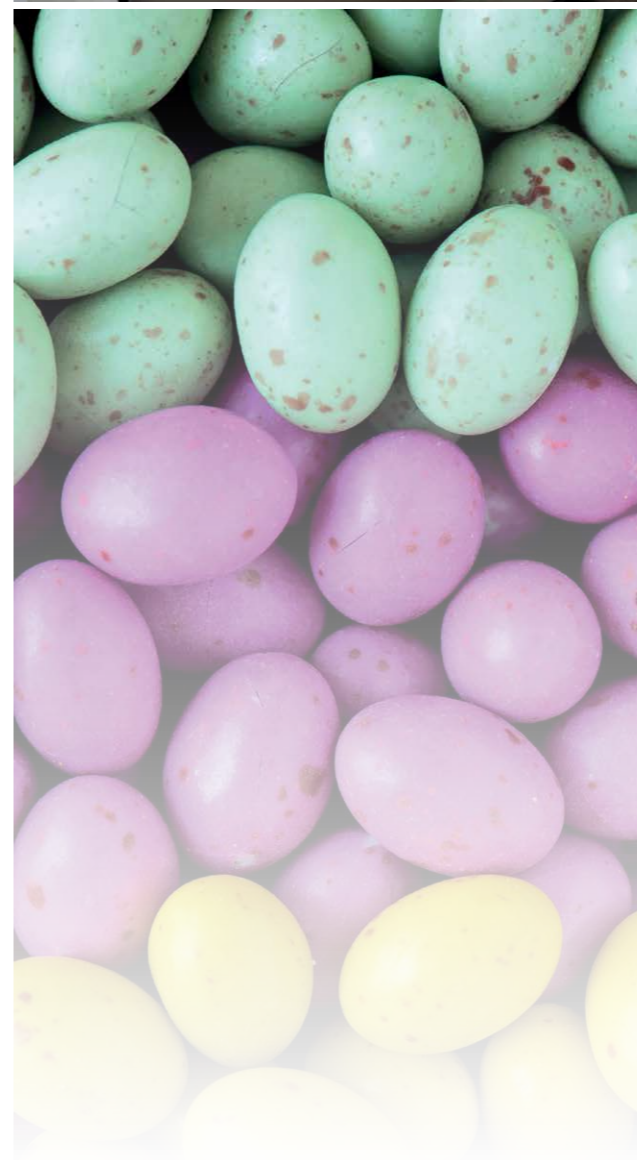
Last Sunday at the modest local church, marked my first outing in public after 25 years. With great relief, I did not make a complete mess of it, and have earned the chance to try again.

I am still trying to digest all this, but mostly feel better fed.

Dr Tony Ireland
DVA Medical Adviser

DIET AND ORAL HEALTH

How eating and drink habits affect our teeth



Eating affects your oral health

The reality is our eating habits play a major role in tooth decay, which is a diet-related disease. Sugars in the food and drinks we eat are taken up by bacteria, producing acids that attack the outer layer of tooth enamel to cause decay.

Our saliva helps our teeth recover from these attacks through a process of neutralising the acids. However, if we frequently snack between meals, there is no rest period for teeth to undergo this recovery process, which may mean that, over time, a cavity forms as a result of these sustained acidic attacks.

Water, water everywhere

Drink it up! It's calorie free, there are no ingredient labels to stress over, and it's almost free! Even better, tap water in most areas of Australia contains fluoride – one of the easiest and most beneficial ways to help prevent tooth decay. Making water your beverage of choice and regularly sipping it throughout the day, including with and right after meals, makes a real difference to the health of your teeth.

BEFORE YOU MAKE ANY DIETARY CHANGES, PARTICULARLY IF YOU HAVE ANY ONGOING MEDICAL CONDITIONS, IT'S BEST TO FIRST CHECK WITH A HEALTH PROFESSIONAL.

Watch what you eat

It is not just the obvious sweet foods and drinks such as lollies and soft drinks that can cause decay. Frequent snacking on foods with hidden sugars like biscuits, crackers, cereals, chips and even dried fruit (these also break down into sugars in the mouth) can cause acid attacks on your tooth enamel.

Here are two teeth friendly habits that you can adopt to reduce your risk of tooth decay.

- Have three regular meal times a day, rather than snacking and grazing.
- Limit your sugary treats to be part of a meal, rather than as a snack.

Gum anyone?

Chewing sugar-free gum (and that's the crucial qualification), it must be sugar-free!) may not be the first thing that springs to mind when you're thinking about good dietary habits to benefit your teeth. Studies have shown that chewing sugar-free gum for 20 minutes after eating can prompt your mouth to produce more saliva, which helps neutralise decay-causing acid attacks.

DIET MATTERS FOR VETERANS

By Gina Howland and Tetyana Rocks, Food & Mood Centre, Deakin University

Military service is tough. What is more, the detrimental health consequences of military service and war zone experience continue long after active duty ends. Both mental and physical health issues in active and retired service men and women are truly alarming. The rate of post-traumatic stress disorder (PTSD) among serving Australian troops is almost double that of the civilian population (about 8.1% compared to 4.6%). Depressive episodes in both male (6.0%) and female (8.7%) Australian Defence Force members are also significantly higher than general community rates (2.9% and 4.4% respectively). Furthermore, those veterans with PTSD or depression are at greatest risk. They have the highest rate of obesity and other physical health problems such as diabetes, hypertension, heart disease, auto-immune disorder and dementia. These veterans also have the greatest prevalence of other psychiatric illness and suicide.



Importantly, mental health and physical health are fundamentally connected and exacerbate each other. Despite this, conventional methods of therapy typically target either physical or mental disorders in isolation. Additionally, therapy or medication may not be the treatment of choice due to factors such as stigma, lack of access, response failure, non-compliance, cost, or side effects.

It is only in recent times that diet has been considered as a possible treatment option for mental health conditions. This is surprising given the key role nutrition plays in the structure and function of our brain and body. Diet is a pragmatic intervention approach, which does

not have to contend with the barriers of conventional approaches. It has only positive side effects and can be used to support therapy or medication. Improving their diet is something all veterans can and should do.

We all know a healthy diet will benefit our physical health by managing body weight, lowering blood pressure, stabilising blood sugars and lipids and reducing inflammation. Diet also has the potential to influence biological mechanisms underlying many mental health issues, including depression and PTSD. Building evidence clearly point to the links between dietary patterns and inflammation, oxidative stress, brain chemicals,

gut microbiome and mitochondrial dysfunction. Studies have found that a healthier diet is inversely related to distress and recent ground-breaking Australian research has demonstrated that dietary intervention for adults with a major depressive disorder is an effective adjunct treatment for depression.

Notably, a good mental health diet is simple, uncomplicated, and inexpensive. It is based on a high intake of vegetables, legumes, fruit, grains, nuts and good quality oil (such as extra virgin olive oil). Good mental health diet also includes moderate amounts of seafood, quality meats and low-fat dairy.

BELOW ARE A FEW SIMPLE STEPS TO FOLLOW TO MANAGE YOUR MENTAL HEALTH VIA DIET:

- Follow 'traditional' dietary patterns, such as the Mediterranean, Norwegian, or Japanese diet
- Increase fruits, vegetables, legumes, wholegrain cereals, nuts, and seed
- Limit intake of ultra-processed foods 'fast' foods
- Eat wholesome nutritious foods for every meal and snack
- Start small with sustainable changes

SOME PRACTICAL STRATEGIES FOCUSED ON IMPROVING YOUR DIET INCLUDE:

- Consider options that require minimal prep/cooking:
 - Canned fish, packaged vegetables and grains
- Consider affordability, accessibility and storage:
 - Frozen veggies, pre-prepared and portioned meals, ready-made meals are great options
- Think about organizing meal prep/cooking groups through your church or sporting club
- Take away is ok:
 - Sandwiches, salad rolls and wraps, veggie-based soups, salads, sushi or rice-paper rolls (avoid cheese, cream-based sources and fried stuff)

FURTHER RESOURCES:

For information, research updates, blog posts see: www.foodandmoodcentre.com

For simple healthy recipes see: www.taste.com.au and www.jamieoliver.com

DAY ON A PLATE

Below is a simple dietary sample plan. Please note that this plan might not be suitable for you. For individual advice please contact your dietitian or other health professional.

BREAKFAST

Whole meal toast (or 2) with low salt baked beans, sliced tomato, mushrooms and onion

OR

Greek yoghurt with fruit and sprinkle of oat flakes or muesli

LUNCH

Salad wrap (wholegrain flat bread, greens, garden veggies, low fat cheese) with extra virgin olive oil as dressing

OR

Whole meal bread sandwich with tinned tuna, garden salad and low-fat cheese

DINNER

Roast chicken, lamb or beef with pre-cooked rice or other grain, plus 2 cups of steamed green veggies of your choice with extra virgin olive oil as a dressing

OR

Baked or grilled fish with baked or boiled sweet potato, pumpkin, onion, capsicum and mushrooms

OR

Lentils, barley and vegetable soup with crusty sourdough bread

SNACKS

Fruit, grain crackers, nuts, yoghurt, veggie sticks

DRINKS

Water, low fat milk, unsweetened coffee or tea



THE BENEFITS OF BUSH TUCKER



As a Kamilaroi woman and one of the very few Aboriginal dietitians in Australia, imagine my excitement when I saw a MasterChef special showcasing the richness and diversity of Australian native foods, also known as bush tucker.

I have always had a keen interest in Australia's native foods. By learning about the stories behind each food, the country and people it comes from and what it was traditionally used for, I find I am able to deepen my understanding of and connection with my own story and my ancestors' stories as well as those of others.

Food is an integral part of culture. Passed down from generation to generation, it is an expression of pride, connection and identity. Sharing stories of the ingredients we use in foods we prepare, provides a portal into each other's cultures, deepening our understanding, appreciation and curiosity of where they came from.

I work with both Aboriginal and Torres Strait Islander and other Australian clients on developing strategies to improve nutritional quality and establish positive, healthful and sustainable food habits. I have found weaving native ingredients into conversation, when appropriate, to be a positive experience. This type of yarning

creates a tapestry between native and mainstream ingredients and opens up opportunities to share stories and knowledges.

Sharing of knowledges not only helps improve food habits, it builds on existing knowledges, strengths and capacities and deepens the understanding and appreciation of the connection between our foods, countries and cultures.

In group education settings, these yarnings often lead to commonalities being realised, cultural connections being formed, and a sense of pride and camaraderie being developed. This group cohesion then fosters a harmonious environment where social inclusion and social and emotional wellbeing bloom. Imagine if this was done on a larger scale?

Fortunately, as a society, we live in a time when native ingredients are becoming more readily available to the wider community. However, I always take care when looking online that I purchase products which are ethically and sustainably sourced, preferably from local communities or organisations. By doing this I am able to minimise appropriation, and contribute to Aboriginal and Torres and Torres Strait Islander communities who are striving to create economic independence, sustainability, job opportunities and healthful food supplies.

Adapting meals to include native ingredients doesn't have to be complicated or MasterChef-worthy. However, simple adaptations could lead to improved health outcomes. For example, simply swapping table salt with saltbush, or flavouring meals with native thyme, native basil or sea celery not only create delicious meals, but could also reduce sodium intake, which is harmful for heart health. Another example is adding finger limes to soda water, providing a refreshing and healthful alternative to sugar-laden soft drinks.

My personal favourite, and business namesake, is Wattleseed. Wattleseed has a nutty, slightly coffee flavour, and is a rich source of protein and slow-releasing carbohydrate. Ground up, this versatile native ingredient can be used as an alternative to coffee and in both sweet and savoury dishes.

When making up soups or slow cooked casseroles, I always make up quick and easy Wattleseed dampers. Depending on what is available in my fridge, I'll add pumpkin, sweet potato and/or sunflower seeds. By adding in the veggies, I can also increase my daily vegetable and fibre intake.

Tracey Hardy BNutrDiet (Hons), APD, DAA Member Wattleseed Nutrition

WATTLESEED, PUMPKIN AND SUNFLOWER SEED DAMPER

INGREDIENTS

- 6 cups wholemeal self-raising flour
- 1/3 cup skim milk powder
- 1 tsp roasted and ground Wattleseed
- 2 tbsp dried saltbush
- 3 tablespoons soft butter
- 1/2 cup cooked pumpkin
- 1/2 cup cooked sweet potato
- 1/4 cup sunflower seeds
- Enough water to mix into a dough

METHOD

1. Preheat oven to 180°C
2. Mix flour, skim powdered milk, wattleseed and sunflower seed together
3. Rub butter into flour
4. Add the pumpkin, sweet potato, mix and a little water if needed
5. Knead mixture for a short time and mound into a large, round shape
6. Mark eight wedges on top and place on baking tray lined with baking paper.
7. Glaze top with milk
8. Bake in preheated oven for one hour or until cooked through. Note: damper will be cooked when you tap it and it sounds hollow

food and nutrition

D	W	E	L	S	M	S	E	D	T	S	D	F	Y
I	A	W	A	T	E	C	X	I	B	E	R	E	T
S	T	U	T	N	U	A	C	G	F	R	U	I	T
L	E	L	S	E	S	R	R	E	E	A	E	S	S
A	R	B	N	I	E	B	E	S	T	W	G	A	T
R	N	A	I	R	M	O	T	T	A	A	F	L	D
E	I	T	M	T	U	H	I	I	F	R	O	S	A
N	E	E	A	U	G	Y	O	O	S	M	O	O	U
I	T	G	T	N	E	D	N	N	G	T	D	D	E
M	O	E	I	O	L	R	E	B	G	H	I	A	G
N	R	V	V	A	O	A	S	T	O	M	G	C	G
A	P	I	I	L	E	T	T	U	C	E	O	O	S
I	R	M	Y	M	B	E	V	B	G	A	D	V	A
D	I	E	T	A	R	Y	F	I	B	R	E	A	R

CARBOHYDRATE
BREAD
MINERALS
FOOD
NUTRIENTS
FAT
AVOCADO
DIETARY
FIBRE
VEGETABLE
LETTUCE
DIGESTION
EXCRETION
WATER
VITAMINS
LEGUMES
EGGS
WARMTH
PROTEIN
FRUIT

Play the puzzle online at: <http://thewordsearch.com/puzzle/896/>

TRANSITION AND NUTRITION

Open Arms - Veterans & Families Counselling (formerly VVCS) is a nationally accredited mental health service, which provides free, confidential counselling specifically designed to support current and former serving Australian Defence Force personnel and their families.

Open Arms has been at the frontline of veteran mental health support for more than 35 years and today provides a 24-hour national service. We provide counselling for individuals, couples and families, case management for clients with more complex needs, group programs to develop skills and enhance support, after-hours telephone counselling, information, education and self-help resources, and referrals to other services or specialist treatment programs as required.

A typical challenge we help our clients with is transitioning from the military back to civilian life. While many make the change successfully, not everyone will have the same experience. Therefore, it's important to plan ahead, stay informed and remain open to change.

Recently, Open Arms hosted a webinar on transitioning out of the military to share some personal experiences and up to date research with the veteran community. The webinar was facilitated by Dr Mark Creamer and featured DVA Assistant Director of Transformation and Organisational Performance, Renee Wilson, and Phoenix Australia Associate Professor, Darryl Wade.

Throughout the webinar, our panellists discussed topics including the latest research on what helps people transition, as well as practical tips to help individuals and the people supporting them to successfully navigate the change. Some of the advice was focused on the importance of remaining physically and mentally healthy throughout the next phase of their lives.

Most people know that a healthy diet is important to reduce the risk of physical health problems. However, they may not know that good nutrition can be equally important for mental health. Here are a few pieces of advice for those looking to safeguard their mental health through healthy eating:

- ✔ **EAT REGULAR MEALS THROUGHOUT THE DAY - THIS HELPS MAINTAIN BLOOD SUGAR LEVELS AS LOW BLOOD SUGAR CAN CAUSE IRRITABILITY AND FATIGUE.**
- ✔ **AVOID REFINED HIGH SUGAR FOODS AND CHOOSE MORE WHOLEGRAIN CEREALS, NUTS, BEANS, LENTILS, FRUIT AND VEGETABLES - SUGARY FOODS ARE QUICKLY ABSORBED AND LEAD TO ENERGY HIGHS AND LOWS.**
- ✔ **INCLUDE PROTEIN IN EACH MEAL - SPECIFIC BY-PRODUCTS OF PROTEIN DIRECTLY AFFECT THE BRAIN AND MOOD.**
- ✔ **EAT A WIDE VARIETY OF FOODS - KEEP YOUR DIET INTERESTING AND INCREASE CONSUMPTION OF DIFFERENT MICRONUTRIENTS.**
- ✔ **INCLUDE FISH, ESPECIALLY OILY FISH, IN YOUR DIET - OMEGA 3 OILS MAY REDUCE SYMPTOMS OF DEPRESSION.**
- ✔ **MAINTAIN A HEALTHY WEIGHT - LOSS OF WEIGHT CAN LEAD TO INSUFFICIENT ENERGY FOR YOUR BRAIN AND GAINING WEIGHT CAN INCREASE DEPRESSION.**
- ✔ **DRINK PLENTY OF WATER - EVEN MILD DEHYDRATION CAN AFFECT FEELINGS AND PERFORMANCE.**
- ✔ **LIMIT YOUR ALCOHOL INTAKE - ALCOHOL HAS A DEPRESSANT EFFECT ON THE BRAIN.**
- ✔ **EXERCISE REGULARLY - THIS RELEASES 'FEEL-GOOD' ENDORPHINS.**

It's important to note that while a balanced diet can help keep you mentally healthy, if you feel mentally unwell then you should always seek professional advice from your GP. DVA White Card holders and those who have served even one day in the ADF are entitled to a free health assessment which can be accessed via www.at-ease.dva.gov.au/gp-health-assessment.

For more information on Open Arms' services and your eligibility, call us on 1800 011 046, visit the Open Arms website at www.OpenArms.gov.au and follow us on Facebook and Twitter. For more comprehensive nutritional information, view the Australian Dietary Guidelines and Australian Guide to Healthy Eating at www.eatforhealth.gov.au.

community foodies

In November 2017, the Port Adelaide Defence Shed and the City of Port Adelaide Enfield Council Health and Wellbeing Team met to consider how to help returned service men and women, along with their families, to eat well and build positive wellbeing.

The evidence around wellbeing tells us that there is a set of actions that when built into our day-to-day lives is important for wellbeing. The seven ways to wellbeing are connect, learn, be active, take notice, give back, eat well and sleep well.

The Defence Shed model clearly identifies as a 'place' where people love to be and where the actions for wellbeing are demonstrated in a practical and supportive way.

The Port Adelaide Defence Shed Chairperson, Flight Lieutenant Ben Parkinson, identified a need for returned servicemen and women to be able to take care of themselves and to learn some basic cooking skills and tips around healthy eating.

With this in mind, the City of Port Adelaide Enfield Community Foodies were engaged to help formulate a plan for a program that was not just driven by the need to share information on basic nutrition and cooking skills, but also to provide social support for men, women and their families.

Community Foodies 'Foodies' are part of the SA Community Foodies Program administered by Uniting Care Wesley Bowden (UCWB) and funded through SA Health.

'Foodies' are community volunteers with an interest in healthy living and trained in basic nutrition and group skills to work with the community to promote key messages and support others to eat well and be healthy.

City of Port Adelaide Enfield have their own team of 'Foodies' via a partnership with SA Community Foodies UCWB who have been trained to deliver programs to local people.

The 'Foodies' formulated a plan for five sessions called 'Cooking for You or a Few'. This program provided the opportunity for people to get together and connect over a meal.

Sessions covered food safety and hygiene, a basic introduction to why and how to eat healthily, reading recipes, cooking and sharing a meal together.

The group fluctuated between seven and nine people and by the end of the five sessions we also had children participating and sharing in the food preparation, cooking and of course eating.

The outcomes of the program demonstrated the value of food as a conduit for social connections. It became apparent from the beginning that while the cooking was an enjoyable and important part of the program, sharing a meal and eating together provided comfort, enjoyment and belonging.

Participants told us how much they enjoyed the program and how they wanted to continue.

It was also apparent that there is a need for programs that support personnel accessing the Defence Shed in a manner that is relaxed, meaningful and welcoming. The Port Adelaide Defence Shed is ideal for this as the atmosphere is warm and welcoming in a homely environment.

The next stage will see a number of Defence Shed regulars trained as 'Defence Shed Foodies'. The program is tailored to meet the unique needs of this cohort and is designed as a peer support model.

This training began at the beginning of August and is already attracting interest from potential 'Defence Shed Foodies' in Port Adelaide.

For more information on the Community Foodies Program visit communityfoodies.com.

For further information about accessing the DVA Cooking for One or Two Program visit dva.gov.au and type 'cooking' into the search window.

**Vanessa Gaston-Gardner
Senior Health and Wellbeing Officer
City of Port Adelaide Enfield**



Left: Flight Lieutenant Ben Parkinson; Right: another Defence Shed member



Defence Shed members

community gardening



The community garden movement in Australia has taken off in the past decade but has been a part of local communities for a hundred years.

The early 1900s saw an increase in community gardens as a response to war and the food shortages where it became necessary to grow fresh foods to survive. A community garden is usually a public piece of land on which fresh food can be grown by a group of like-minded people who usually integrate organic principles, composting, worm farming and water harvesting.

Community gardens are now being recognised as an inventive way to not only grow fresh, nutritious food to share but to improve the health of all involved. Gardening is a great way to relax, providing opportunities to still the mind and get away from the craziness of everyday life. There is evidence to suggest that gardening can boost physical and mental health and wellbeing.

Community gardens bring together people from different backgrounds and ages, and while gardening is the focus, community gardens are hubs for a range of activities including learning, creative activities, preparing and sharing food, community events, social contact or just a quiet spot for personal contemplation.

Turning an unused plot of land into productive social hubs is just one of the benefits of community gardening. They also show the way to living sustainably in an urban environment offering waste minimisation, composting and water usage techniques that can be used by people in their own homes. Some community gardens are adopting the principles of permaculture as a way to sustainably manage the land and the environment.

Permaculture uses a system-based approach which mimics the patterns and relationships found in nature. The word itself is a combination of permanent and agriculture/culture, reflecting the fact that cultures cannot survive for long without a sustainable agricultural base and land-use principles.

The concept of permaculture design was created by Australian's Bill Mollison and David Holmgren in the late 1970s in Hobart. Since then, it has become a worldwide movement and the application of the principles in poorer countries has empowered people to live sustainably and rebuild communities that have relied on government aid for decades.

Karen McInnes, DVA



more information

Information about community gardening is available at the Australian City Farms and Community Gardens network at communitygarden.org.au.

For an example of a working permaculture farm, visit David Holmgren's property Melliodora at holmgren.com.au/melliodora.

A collection of various permaculture links, related people, projects and organisations can be found at permacultureprinciples.com/resources/links.

ARE NUTRITIONAL SUPPLEMENTS WORTH IT?

As a dietitian, I often hear of the number of supplements people consume on a daily basis in the belief that they will improve their health and hopefully prevent disease. As the theme for Veterans' Health Week is nutrition, now is a wonderful opportunity to investigate whether supplements are worth it – in terms of your health and hip pocket.

Nutritional supplements contain concentrated amounts of particular vitamins or minerals which are intended to supplement your typical diet. As you walk through your local pharmacy, supermarket or health food store, you will notice supplements in many forms including powders, pills and even chewable lollies.

Currently, 29 per cent of Australians take at least one nutritional supplement each day, with women and older Australians consuming the highest proportion. A study published this year investigated whether taking nutrition supplements had any effect on heart disease outcomes and causes of death. Interestingly, results showed that nutrition supplements had no benefit.

When we eat, we eat whole foods – rather than single nutrients. Let's look at this in a 'real world' context. For example when eating a yoghurt we are consuming calcium, vitamin D, iodine, zinc, vitamin B6 and B2. When we focus on consuming one single

vitamin or mineral in the non-food form, we risk missing out on the other beneficial nutrients that we would have gained if we had eaten this as a whole food.

The Australian Dietary Guidelines provides a guide as to how many 'serves' we should have from each food group per day depending on age and gender. The guidelines were developed to reduce diabetes, heart disease and some cancers in the Australian population. The Australian diet is relatively poor with less than four per cent of the population consuming enough vegetables or legumes and failing to meet the minimum requirements of each food group.

So what is the answer? Focusing on improving your diet is the first step because the body is designed to absorb nutrients readily from food sources compared to nutrients in tablet, powder or pill form – plus food provides you with a range of other vitamins and minerals too. It's a win-win. By using the Australian Dietary Guidelines, you can ensure you are having sufficient 'serves' of each food group per day by using the simple serve examples listed.

However, supplements do have their place in certain circumstances. In particular vitamin and mineral supplements can be used for people who are unable to meet their nutritional

requirements through food alone. Your medical professional may advise you to consume a nutritional drink containing more energy and protein to increase or maintain weight or for those with specific medical illnesses/conditions. Remember to follow the individualised advice of your GP or ask them for a referral to see an Accredited Practising Dietitian who will be able to provide you with individualised support. You can find more information about the Australian Dietary Guidelines by going to eatforhealth.gov.au and following the links.

Ella Monaghan (Accredited Practising Dietitian) MDiet, APD, BF&Nutr

FOOD FOR THOUGHT

When I was a young doctor, an experienced orthopaedic surgeon was discussing the increased number of lower limb injuries caused by long-distance running. He suggested these were the result of our modern lifestyle. He felt that human beings evolved to walk long distances and run short sprints. So what has this to do with nutrition? Well nothing really. But it sowed a seed in my mind to consider our evolutionary history when faced with some complex situations.

Moving onto nutrition. Our obesity epidemic is also blamed on our modern lifestyle. In particular, sugar, soft drinks, fast foods, processed foods and alcohol are commonly identified as the cause. There is an almost unlimited number of diets claiming to be the answer to weight loss. Some contradict others. How does anyone decide which one to follow: a low-fat diet, an Atkins diet, paleo diet, a Mediterranean diet, a five plus two diet or a high-fat low-carbohydrate diet? Or should we spend thousands of dollars on bariatric surgery? So this was the challenge facing me when I began preparing this article.

The bottom line is that all diets work in the short-term. But we have three decades of proof that none of them work long-term. In particular, eating less and exercising more has been a dismal failure. But why? The 'calories in - calories out' model is too simplistic. It does not take into consideration that the body actually has two sources of energy and not one. The glycogen stores in our liver are used as a quick source of energy - such as, in prehistoric times, when we needed to sprint to chase food or to avoid predators. Our backup fat storage is used for those long walks to the next hunting or fishing ground, or to tide us through a long winter.

We have evolved to survive by going from feast to famine.

There is hormonal regulation of our metabolism and our appetite. We use a considerable amount of energy each day just to maintain our body heat and our essential body functions. If we go on calorie restriction for a length of time our body compensates by lowering its resting metabolic rate which is why people often feel cold when dieting. And exercise is a very slow way to use calories although it has other benefits. A brisk 45-minute walk will only use four per cent of the calories we require each day.

It now appears that insulin is one of the main hormones associated with obesity. When we eat food, our insulin levels increase. We store glycogen (essentially a long chain of glucose) in our liver to use for our immediate energy needs. Insulin is released when we eat and ensures that any excess food is converted into fat and stored for use when food is scarce.

When I was young, there were very few adults and children who were obese. But we did not snack between meals. Nowadays, we are bombarded with food advertisements and it appears we cannot watch TV, go to the movies, watch sport, go for trip in a car or have a meeting without food being present. The consequence of this is that we are eating much of the time and therefore continually producing insulin and making fat. And we have unlimited potential to store fat in our bodies. The excessive production of insulin can result in tolerance (insulin resistance) which is the cause of metabolic syndrome and type 2 diabetes. So we need to reduce the production of insulin.

We always use our liver glycogen for immediate energy needs. The



only way we can turn fat back into energy is by fasting. Eating stimulates the release of insulin and immediately stops the conversion of fat into energy. So if we never get into the fasting state, we can never burn our stored fat.

Fasting is nature's way of managing obesity. Fat is our alternative source of energy but most of us rarely use it. Does fasting work? Yes. Regardless of the method of fasting, scientific studies show that people who fast lost on average five kilograms of fat over a period of 10-12 weeks, reduced their cholesterol levels by 10 per cent and their blood triglycerides (fats) by 50 per cent. Type 2 diabetes has been reversed by intermittent fasting.

When we break our fast, we should eat until we are satisfied. We should eat high-fat low-carb food and avoid starches, sugars and processed foods because these are the ones that overstimulate the release of

insulin. Also many processed foods and drinks contain high levels of fructose which again is converted into fat.

Won't we get sluggish and unable to concentrate if we are not eating? I think this is more the reality after a big meal. Do hungry animals look sluggish and show poor concentration when hunting? No - just the opposite. We become more mentally alert and our muscles are preserved during fasting, otherwise we would never have survived.

So I think intermittent fasting is the most sensible approach to losing weight. Most of the benefit is obtained after around 18 hours

of fasting. Some people start by skipping breakfast when our appetite is low. But flexibility is the key with the aim of trying to confine your daily food consumption to a period of just four to six hours. Most people find strict regimens hard to maintain. Intermittent fasting can be undertaken whenever it suits your lifestyle. Hunger comes in waves and is often easily managed by drinking green tea or coffee with a little milk if needed.

Eating three meals a day is not essential. It is certainly important for growing children and pregnant and breastfeeding women as well as for people with some medical conditions. Most adults probably eat three meals a day simply out of habit.

If you wish to find out more, I urge you to watch the six YouTube videos by Dr Jason Fung called 'The Aetiology of Obesity' or visit his webpage 'Introduction to fasting for beginners'.

So the message is eat less frequently, but eat well when you do. So it is not only what you eat but when you eat. We should be counting hours, not calories.

Of course, if you are on medications or have medical problems then please consult your doctor for advice before starting any fasting program.

Dr Warren Harrex
Senior medical advisor



A VETERAN'S STORY

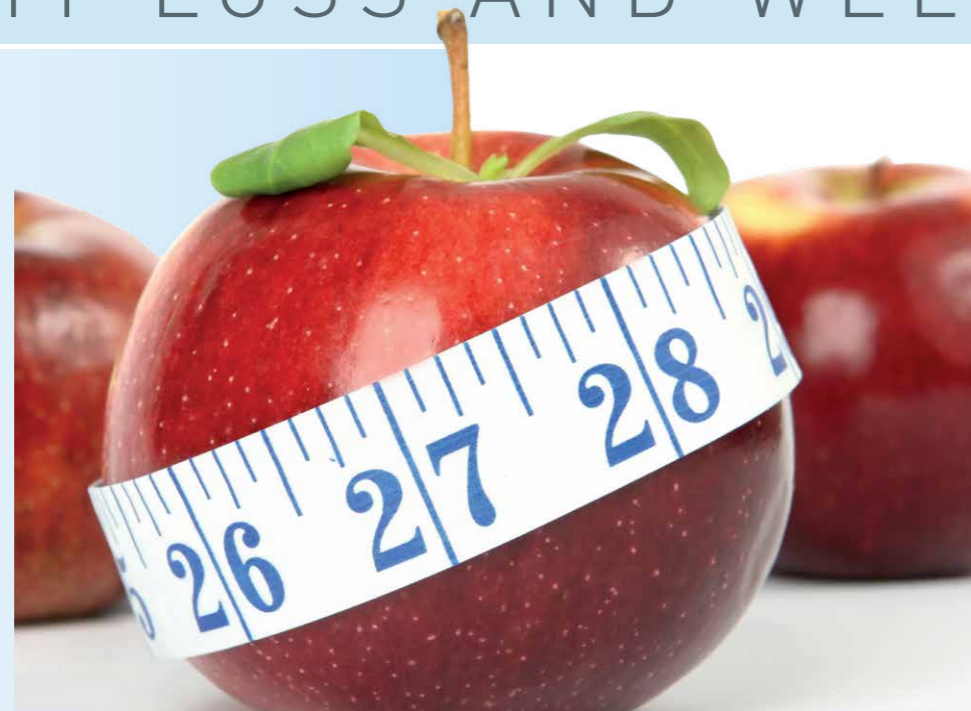
MY WEIGHT LOSS AND WELLBEING JOURNEY

After my discharge from the Royal Australian Air Force my world began to fall apart. Plagued by illness and injury, my marriage disintegrating, and adrift from any meaningful sense of purpose and social connection, my ability to hold it all together was badly hampered. I started to self-destruct in a variety of ways - I stopped exercising, ate for emotional comfort rather than fuel and nutrition, adopted risk taking and avoidant behaviours, and focussed on an overly negative outlook on life and my future.

By 45 I felt I was washed up, broken, on an irreversible downward descent, and had missed the boat on finding true happiness, health and professional success.

Then in 2016, I was diagnosed with the incurable, progressive adipose tissue disease lipoedema. The long-term prognosis was one of significant pain, increasing weight gain, immobility and disfigurement. Ironically this diagnosis was one of the best things to ever happen to me. It reminded me that there were genuine reasons behind my ill-health, not just my failure to get my act together. It forced me to make a choice - either I picked myself up and made my health and wellbeing a priority in order to fight the disease from the best possible position; or lie down and let my victimhood and grief determine my future. I chose the first option.

It wasn't easy. I was 47 years old, obese and unfit. I started by visiting my GP and requesting a referral to an exercise physiologist using my DVA Health Card. I also commenced yoga, recumbent cycling, daily walking and therapy with a DVA-funded Psychologist. On my first day at the gym I was incredibly embarrassed - I felt very self-conscious about my weight and I wore loose, baggy clothing to try and hide it. I also felt very uncoordinated and out of place on the training machines in front of all the beautiful people. For a few weeks



it all seemed quite surreal - like I was in someone else's damaged body; a long way from the slim, fit, healthy body that had passed RAAF physical fitness tests with ease. But as I worked hard and saw results - I began to feel at home, and I realised that I belonged at the gym - as much as anyone else. It soon became a place I looked forward to going to.

I also undertook substantial research into human body fat and obesity. Lipoedema is a disease of the subcutaneous adipose tissue, the fat that sits beneath the skin. It is affected by oestrogen and does not respond to standard caloric restriction dieting. It is also made worse by non-lipoedemic regular (obesity) fat. I realised that I had to reduce as much regular fat as possible to give myself the best chance of fighting the disease.

Through my research I established that the key to improving my overall health and best managing my weight was excluding certain foods from my diet and increasing others, rather than focussing on limiting calories and restricting all foods.

I WANTED TO SPECIFICALLY TARGET FOODS FOR EXCLUSION BECAUSE THEY:

- were inflammatory
- spiked insulin levels (especially empty carbohydrates, fructose, lactose and glucose)
- were causing irritable bowel syndrome (IBS), a sign of intolerance to certain foods
- were highly processed, refined and full of chemicals
- provided little or no nutrition.

I ALSO WANTED TO SPECIFICALLY TARGET FOODS FOR INCLUSION BECAUSE THEY:

- were anti-inflammatory
- assisted my gut health
- contained healthy natural fats, with a higher ratio of omega-3 to omega-6
- were primarily whole foods (as opposed to manufactured ' Frankenfoods')
- contained a range of necessary micronutrients in a healthy, nutrient-dense manner (especially calcium, magnesium, potassium, iron, selenium, zinc and biotin).

To achieve this I used my research to devise, not a diet, but a 'way of eating' (WOE), which incorporated elements of nutritional ketosis (also known as keto or low carb high fat), low FODMAP (to address my food intolerances) and intermittent fasting. Together these addressed my body's individual needs. To ensure that I was not going to cause micronutrient deficiency or long-term damage, I did this in consultation with a dietitian (via my DVA Health Card) who helped me work out a healthy macro and micronutrient balance within the limitations of my chosen WOE.

I commenced by removing wheat products, dairy, sugars, sulphites, starchy vegetables and processed food from my diet whilst increasing high healthy fats and low net carbohydrate vegetables. I also incorporated medically recommended fasting principles on an occasional basis. The resulting change was dramatic. Not only did I start losing excess body fat easily, but my concentration improved, my headaches reduced, my leg pain eased, my IBS disappeared, I no longer had an afternoon exhaustion slump and need for a carb binge, my irritability and anger lessened, I had more stamina and strength at the gym, I felt happier overall, and best of all - my symptoms of post-traumatic stress disorder and other mental health issues dramatically improved. For the first time in decades I felt peace within my body, rather than the constant amped up fight-or-flight mode that previously overshadowed my life day and night.

Two years later, still happily sticking to my new lifestyle and WOE, I am a different person. My blood test results are perfect. At almost 50 years of age I have lost 50 kilograms of excess weight and emotional baggage. I am happy, calm, content, energetic, engaged with my children, professionally productive and living a life that I didn't imagine was possible five years ago.

I exercise regularly, never count calories, do not hate myself anymore, and look forward to the future. I still face mental health challenges, but they are much easier to manage in a fit and healthy body. I feel like I am now going into my fifties with a sense of control, purpose, self-determination and agency. Some people still accuse me of 'fad dieting' because low carb and high (healthy) fat eating appears contrary to the traditional wisdom of low fat and low calorie eating, even though much modern 'diet' food is highly processed and refined.

I'm sticking with healthy whole foods that work for me and many others, and avoiding the inflammation and gut issues that I believe were making my mental and physical health worse. Thankfully there is a growing movement of enlightened thought in the medical community to support choices like mine, especially for those with depression, IBS and insulin resistance.

An example of the sorts of food I eat daily with pleasure:

BREAKFAST

Frittata/omelette containing eggs, canned red salmon, kale, broccoli, red capsicum, cauliflower, mushrooms, zucchini, almond meal, chia, psyllium, flax meal, turmeric, black pepper, salt, parsley and sesame seeds. Fried in a mixture of coconut and olive oils.

LUNCH

Salad of baby spinach and rocket mix, shredded BBQ chicken meat with skin on, macadamias, brazil nuts, preservative-free shredded coconut, blueberries or raspberries, chia, salt and pepper, and a dressing of olive oil, apple cider vinegar and fresh lemon or lime juice.

DINNER

Curry based on coconut cream (without rice), or pasta sauce based on tomato (on zucchini spirals), or shallow fried lamb/pork/chicken/salmon/shellfish/steak with non-starchy vegetables. All my meals, whether curries, sauces or shallow fried meats, contain high amounts of dark leafy green vegetables.

DESSERT

Chocolate berry pudding containing Lindt 90% dark chocolate melted in the microwave with coconut cream (in a soup cup), mixed with thawed frozen raspberries, almond meal, chia, psyllium, flax meal and stevia to taste.

SNACKS

I rarely feel the need to eat snacks as my meals are nutrient dense and the high healthy fats satisfy me. If I do eat snacks, I choose macadamias, almonds, Brazil nuts, coconut chips, berries, and coconut yoghurt.

DRINKS

Water (tap or sparkling), freshly squeezed lemon or lime juice (mixed with water), apple cider vinegar (mixed with water), herbal tea, champagne, wine, berries blended with coconut milk or water. I don't like coffee, but I could drink this too if I did.

I am proof that you are never too old and it is never too late to change your life for the better.

Lauren Eastaughffe

ALCOHOL AND MEN'S HEALTH

Males are twice as likely as females to drink daily and to drink alcohol in risky quantities. Consequently, males have consistently had higher rates of alcohol-related deaths and hospitalisations than have females. Males who drink above the low-risk guidelines have around a 30 per cent risk of lifetime alcohol-related disease or injury.

Half of all males have had a drinking session that placed them at immediate risk of harm and almost a quarter of males take this risk at least once a week. The overall increased risk of death for men from at-risk regular drinking is:

- 10% from 3 standard drinks per day
- 19% from 4-5 standard drinks per day
- 52% from 6 or more standard drinks per day.

Males aged between 15 and 29 years account for around 28 per cent of all alcohol-related injury deaths and over a third of alcohol-injury hospitalisations. Alcohol-related hospitalisations are increasing in some parts of Australia. About four per cent of male deaths are alcohol-related, with the main causes of such deaths being alcoholic liver cirrhosis, road injury, stroke and suicide.

Research shows that for men:

- Binge patterns of drinking and blood alcohol levels above .05 are associated with greater risk of injury and death, especially among younger men.
- Drinking above two standard drinks on any day is associated with significantly greater risk of harm in the long term and drinking above four drinks on any one occasion is associated with a greater risk of injury during or soon after the drinking.
- The greater the amount of alcohol consumed, the higher the risk.
- Maximum health benefits for the heart may possibly be gained from about one standard drink every second day for men aged 40-45 years and older.

The main acute and chronic alcohol-related conditions in males

ACUTE CONDITIONS (that is, conditions associated with intoxication) account for around 40 per cent of alcohol-related male deaths (especially road injuries and suicide) and two thirds of alcohol-related male hospitalisations (especially falls, assaults and road injuries).

- Alcohol is a major cause of road injury and males are about four times more likely to be alcohol-related fatalities in single-driver accidents than are females. Those men at particularly high risk include men less than 25 years of age, particularly those living in country regions.
- Alcohol is an added risk factor for injury and death during activities such as swimming, diving, surfing, boating, water skiing and fishing, and accounts for around one third of drownings in males aged 15-29 years.

Alcohol is a major contributing cause of violence; about three quarters of hospital admissions for alcohol-related assaults are male.

- Heavy drinking is a major risk factor for suicide.

CHRONIC CONDITIONS (conditions associated with long-term alcohol use above the low-risk limits) account for over half of alcohol-related male deaths with the main causes being alcoholic liver cirrhosis and strokes. Other conditions that have an increased risk from drinking above the low-risk levels include:

- Type 2 diabetes from six standard drinks a day (however, two standard drinks a day might be mildly protective in developing diabetes).
- Early onset of macular degeneration (which can lead to partial blindness) increases by nearly half from three standard drinks or more a day.
- Pancreatitis increases by 20 per cent from three standard drinks a day and by four times (400 per cent) from eight or more standard drinks a day.
- Sexually transmitted diseases from unprotected sex are more likely after a drinking session.
- Heavy drinking is associated with poor sexual performance, reduced desire, and impotence.
- For many men, heavy drinking will lead to increased weight.

Depression and anxiety can be caused or made worse by heavy drinking.



CANCER A wide range of cancers is more likely when drinking regularly. Some of the more prominent cancers include:

- Gastric cancer (increases by 20 per cent from four standard drinks a day)
- Liver cancer increases by 16%, 46% and 66% from 3-4, 5-9, and 10 or more standard drinks a day respectively
- Colorectal (bowel) cancer increases by 7%, 38% and 82% from 1, 5-9, and 10 or more standard drinks a day respectively
- Oral cavity (mouth and surrounding tissues) cancer increases by 17 per cent from any regular drinking (i.e. from 1 standard drink a day)
- Oesophageal cancer increases by 30 per cent from any regular drinking (i.e. from 1 standard drink a day)

Alcohol might help to prevent heart disease from about 40-45 years of age for males but the maximum benefit can be gained from just one standard drink every second day. (See the fact sheet on alcohol and heart disease for more information on the possible protective effects of alcohol on the heart and the limitations of the research).

However, alcohol is not necessary to achieve this health benefit, as it can be obtained equally effectively by using other strategies, preferably in combination, such as stopping smoking, increasing exercise, improving diet, and taking small quantities of aspirin.

Recommended consumption levels for low-risk drinking

For healthy men and women, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury.

Drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion.

For children and young people under 18 years of age, not drinking alcohol is the safest option.

For women who are pregnant, planning a pregnancy, or breastfeeding, not drinking is the safest option.

Further reductions in the lifetime risk of alcohol-related disease or injury can be achieved by reducing the number of occasions of drinking across a lifetime, for example through regular alcohol-free days.

You can find more information on the recommended levels of alcohol consumption in the Guidelines for Alcohol Consumption Fact Sheet.

Adapted from Australian Department of Health and Ageing, Australian Alcohol Guidelines Fact Sheets www.alcoholguidelines.gov.au

How important is food to your HEALTH, FITNESS, WELLBEING?

Pretty important apparently!

Sometimes though, it can be difficult to sift through the mountains of information on nutrition to find the right advice for you. We all have questions about what's good and what's bad? Why is it so difficult to just eat healthily? How does what I eat really affect my health?

To get all the facts (well, at least some of them) we decided to ask some dietitians. Jenna and Geri, who also happen to be health coaches on the DVA-funded Heart Health program, agreed to answer MHPE Magazine's questions. We asked them about food's importance when it comes to its effect on things like overall health, our fitness and even our mindfull health.



MHPE Magazine:

So, Jenna and Geri, thanks for answering our questions. How DOES food affect our general health?

Jenna:

No problem, MHPE. Food is so much more than just fuel for our body. It can have a profound impact on our general health as well. An unbalanced diet is considered a risk factor for many chronic health conditions. Conditions like heart disease, diabetes, high cholesterol, high blood pressure and some forms of cancer. An unbalanced diet is one that's lacking in whole fruit, vegetables, some dairy and wholegrains. It also includes an excess of fatty red meats, a high intake of heavily processed foods like cakes, soft drinks and fried foods. Basically, the typical western diet and one which we have become accustomed to. This type of diet may not be doing our bodies any good.

I have some good news though. A balanced diet can reduce your risk of developing these conditions or if you have already developed one of these conditions, a healthy diet will help you to manage it.

MHPE Magazine:

Which foods do we need to eat regularly to give ourselves the best chance of improving and maintaining the health of our bodies?

Geri:

There's no one size fits all approach with nutrition. The body's ability to tolerate certain types of food a diet can differ dramatically from one person to the next. But as a guide here are some general tips that will get you started.

- 2 serves of fruit per day (a serve of fruit is a medium piece like an apple or banana or two smaller pieces like nectarines or kiwi fruit or 1 cup of diced or canned fruit)
- 5 serves of vegetables per day (a serve of vegetables is ½ cup of cooked vegetables, a full cup of salad or raw vegetables or ½ medium potato or sweet potato)
- 2 ½ - 3 ½ serves of dairy per day (a serve of dairy is 250ml milk, 200g yoghurt or 2 slices of cheese)
- 4 ½ - 6 serves of wholegrains (a serve of wholegrains is 1 slice of wholegrain bread, 2-3 crispbread, ¼ cup oats, ¾ cup cereal)
- 2 ½ serves of lean meat (a serve is 1 cup of legumes, 65g cooked meat, 80g cooked chicken, 100g cooked fish, 170g tofu, 30g nuts and seeds)

If you know that your diet doesn't contain many of the foods mentioned, consider changing one thing over the next couple of weeks. It can be as simple as having a piece of fruit each day. Once you've mastered that goal, add in another small change. Consistency along with moderation is the key



MHPE Magazine:

Great, some solid advice there, Geri. What about food and exercise, Jenna?

Jenna:

For exercise, treat food like fuel. And just like fuel, there are poor-quality fuels and high-quality fuels. If you put better quality fuel in the tank, you'll get better mileage, have a smoother trip and have less build-up of impurities in your tank. Eating healthy, nutritious foods will give your body what it needs to be able to fuel your exercise. Less refined foods or foods close to their natural state will give your body longer lasting energy. Highly refined or processed products will give you a temporary spike in your blood sugar levels and then a huge dip in energy, leaving you craving for another 'pick-me-up'.

Consider how much fuel you'll need to get through the day. Take note of portion sizes.

MHPE Magazine:

I'm now looking forward to my next bike ride. Last question, Geri, how does nutrition affect wellbeing or mindful health?

Geri:

The way we eat can have an impact on our mindful health and wellbeing. Eating offers an opportunity to connect with others. Whether it be at home around the dinner table or standing outside by the barbecue with some mates or neighbours or in a local restaurant or food court. Recent research suggests that eating alone is linked to an increased risk of developing depression. In fact, eating alone is considered a more significant risk factor for depressive symptoms than living alone. My suggestion: the next time you are asked out for a meal, consider accepting, knowing that it may benefit your mental health and wellbeing.

MHPE Magazine:

Thanks Jenna and Geri, any last message?

Jenna:

We've spoken a lot about the everyday core foods, but we haven't spoken much about the yummy discretionary choices like cakes, biscuits, soft drink, lollies etc. You do not have to exclude these foods from your diet. I would however

suggest that if you are having them regularly and mostly out of habit, consider replacing them with the core foods (listed above). Then, when you really feel like some discretionary choices, give yourself the time to really savour the taste, texture and flavour of the food. Enjoy it fully and without guilt. Life is all about balance.

Food gives us joy, it connects us and impacts many aspects of health. Now is always the right time to start making positive changes to your health.

MHPE Magazine:

As always, your doctor will be a great place to start for advice on any health concerns. But for more advice, guidance and support on nutrition you could also try the DVA-funded Heart Health program, which is a 12-month health and fitness program available to eligible returned veterans and peacekeepers. To confirm your eligibility please visit veteranshearthealth.com.au/eligibility.

Or call the program providers Corporate Health Management to learn more on **1300 246 262**.

IMAGE OF BURGER AND CHIPS BY ROBIN STICKEL FROM PEXELS
IMAGE OF PANCAKES BY ASH FROM PEXELS
IMAGE OF LEMONS BY DARIA SHEVTSOVA FROM PEXELS

SPIDER WEBS AND BOOKWORMS

Books

A FAT LOT OF GOOD / DR PETER BRUKNER OAM

How to outsmart bad health advice and make simple changes for long-lasting energy, weight loss and wellbeing. Like most doctors, Peter Brukner was trained to believe that drugs and surgery are the answers to all medical problems – including the epidemics of obesity, diabetes and other ‘modern illnesses’ that are threatening our healthcare system and the life expectancy of future generations. For years he was dismissive of any ‘alternative’ diets or lifestyle changes. But that all changed when, facing the double threat of obesity and diabetes himself, he switched to a low-carb, healthy fat lifestyle – and dropped 13 kilos, lowered his insulin levels and drastically improved his liver function in just three months.

Penguin Life, 2018.
RRP: print \$34.99; eBook \$14.99

EAT BETTER, LIVE LONGER: UNDERSTAND YOUR BODY AND STAY HEALTHY / DR SARAH BREWER

Ever wondered what's really going on in your body as you age? Can you really eat to beat cancer or prevent heart disease? These questions and more are answered in Eat better, live longer, helping you transform your diet from day one. Discover the secrets of long life from centenarians around the world, and explore the 10 simple but meaningful changes you can make both to what you eat and to how you eat to follow in their footsteps. A four-week eating plan, with more than 110 nutrient-packed recipes, helps you to make smarter choices about foods that can reduce your risk of certain diseases and lessen the effects of others. Use this new-found knowledge in tandem with details on how each part of your body changes as you age and which nutrients you need to support all-round health, helping you live a longer, happier life.

Dorling Kindersley, 2018.
RRP: print \$35.00; eBook \$10.99

CATHERINE SAXELBY'S COMPLETE FOOD AND NUTRITION COMPANION: THE ULTIMATE A-Z GUIDE / CATHERINE SAXELBY

Despite the huge gains in nutritional knowledge, healthy eating has not become easier. In our time-poor society, fewer people regularly cook and eat at home, and many rely on take-away and fast foods. In effect, we are suffering from malnutrition in the midst of plenty, along with many modern lifestyle diseases. A leading nutritionist for over 25 years, Catherine has educated a generation of Australians about healthy eating and getting the most from their diet. In this updated edition of the Complete Food and Nutrition Companion, Catherine presents an A-Z guide to everything you need to know to get healthy, live longer and live better. With more than 500 entries covering whole foods, processed foods, additives, nutrients, supplements and more, this is the ultimate family reference for good health and nutrition.

Hardie Grant, 2018.
RRP: print \$39.99; eBook \$14.44

THE GOOD GUT COOKBOOK / DR ROSEMARY STANTON

A healthy body needs a healthy gut. More and more researchers are finding out how complex and important the gut is to our mood, wellness and longevity. So many problems can be traced to the gut – from obesity and allergies to cramping and chronic malaise. Taking care of your gut by understanding what it consists of, how it works and what to feed it is the first step towards good health. Highly respected nutritionist Dr Rosemary Stanton shows us that good eating doesn't mean boring food and difficult recipes, but can actually lead to fresh, simple, tasty meals, and – most importantly – a calm, regular and healthy gut.

Harper Collins, 2018.
RRP: print \$24.99; eBook \$14.99

THE HAPPY KITCHEN: GOOD MOOD FOOD / RACHEL KELLY

What foods make us happy? Scientists are now discovering a proven link between what we eat and how we feel. In this inspirational book Rachel Kelly, who has had a history of depression, shares her personal experience of harnessing the power of food to stay calm and well. Over the past five years she has worked with nutritional therapist Alice Mackintosh to build up a range of delicious recipes, designed to boost energy, relieve low mood, comfort a troubled mind, support hormone balance and help you sleep soundly. Simple meal planners, seasonal shopping lists and invaluable nutrition notes that explain the science of good mood food for everyone.

Short Books Ltd, 2016.
RRP: print \$29.99; eBook \$16.99

A LIFE LESS STRESSED / RON EHRLICH

A holistic guide to the stresses that wear us down and the simple changes we can make to lead happier, healthier and more resilient lives. Life has never been more stressful. It is no coincidence that chronic degenerative disorders such as cancer, heart disease, autoimmune illnesses, and mental-health conditions are on the rise. But if we want to tackle them, we need to look beyond their symptoms. That is the message of dentist and health advocate Ron Ehrlich. He explores why public health messages have been so confusing and often contradictory, including the role of the food and pharmaceutical industries in all parts our healthcare system. It's a story that's easy to miss but difficult to ignore. He then untangles how problems in one part of the body are intimately connected to the whole and how we as individuals are inextricably linked to our own environment. Ehrlich redefines the stresses that affect us in our modern world, and shows how to strengthen the five pillars – sleep, breathing, nutrition, movement, and thought – that support our health. A Life Less Stressed will help you develop a broader understanding of the challenges we face today and empower you to take control, build resilience, and be the best you can be.

Scribe Publications, 2018.
RRP: print \$35.00; eBook \$13.82

Websites

AUSTRALIAN DIETARY GUIDELINES / NATIONAL HEALTH AND MEDICAL RESEARCH COUNCIL

The Australian Dietary Guidelines have information about the types and amounts of foods, food groups and dietary patterns that promote health and wellbeing and reduce the risk of diet-related conditions. The guidelines apply to all healthy Australians, as well as those with common health conditions such as being overweight. They do not apply to people who need special dietary advice for a medical condition, or to the frail elderly.

Go to eatforhealth.gov.au and follow the links.

AUSTRALIAN GUIDE TO HEALTHY EATING / AUSTRALIAN GOVERNMENT DEPARTMENT OF HEALTH

The Australian Guide to Health Eating is the national Australian food selection guide. The guide is consistent with the 2013 Australian Dietary Guidelines and visually represents the recommended proportion for consumption from each of the five food groups each day. Following a dietary pattern in these recommended proportions will provide enough of the nutrients essential for good health.

Go to health.gov.au and type 'Guide to Health Eating' into the search window.

FOOD & MOOD CENTRE / DEAKIN UNIVERSITY

The Food & Mood Centre at Deakin University carries out cutting-edge research to identify new and effective approaches to the prevention and treatment of mental and brain disorders. The website helps to improve your understanding of nutrition and helps you to make positive improvements to your own nutrition and mental health.

foodandmoodcentre.com.au

HEALTHY EATING QUIZ / DIETITIANS ASSOCIATION OF AUSTRALIA

Eating well is key to feeling your best, both now and in the long-term. We know healthy eating plays an important role in keeping your body healthy and strong, as well as preventing illness. How does your diet stack up? Take the Healthy Eating Quiz to find out.

Go to daa.asn.au and type 'Healthy Eating Quiz' into the search window.

RECIPES / NUTRITION AUSTRALIA

Eating a healthy balanced diet is important for good health and maintaining a healthy weight. Nutrition Australia recipe collection is full of delicious options for breakfast, lunch and dinner as well as ideas for nutritious soups, salads and snacks. The recipes are preparation friendly and are suitable for all levels of cooking ability – from beginners to experts.

nutritionaustralia.org/national/recipes



MENTAL HEALTH TREATMENT EXPANDED

Are you an Australian Defence Force (ADF) Reservist with disaster relief service, border protection service or prior involvement in a serious service-related training accident? If so, you may be eligible for mental health treatment funded by the Department of Veterans' Affairs (DVA).

Current and former permanent full-time ADF members and Reservists with Continuous Full-Time Service (CFTS) can receive DVA-funded treatment for any mental health condition. A diagnosis is not required to receive this treatment and there is no requirement to prove that the mental health condition is related to military service. These arrangements are known as Non-Liability Health Care (NLHC).

From 1 July 2018, this program was expanded to include some current and former Reserve members of the ADF with certain service. Reservists who rendered Reserve Service Days with disaster relief service, border protection service or were involved in a serious service related training accident are now eligible for DVA-funded mental health treatment.

Any mental health condition is covered under this program, including post-traumatic stress disorder, depression, anxiety and alcohol-use disorder. A range of treatment options are available, including services provided by a general practitioner, psychologists, psychiatrists, mental health social workers and occupational therapists.

It is easy to apply for this program. Those seeking treatment for a mental health condition can make an application via email at NLHC@dva.gov.au, by calling 1800 555 254 or lodging a completed claim form.

Applicants will need to satisfy proof of identity requirements, and ADF service will need to be confirmed.

For further information, including links to Factsheets and application forms, please visit www.dva.gov.au/nlhc.



An Australian Government Initiative



VETERANS' HEALTH WEEK

nutrition

Veterans' Health Week 2018

Veterans' Health Week (VHW) is an annual initiative where DVA partners with ex-service and community organisations to:

1. **increase the health awareness of current and ex-service members and their families, and**
2. **encourage behavioural change leading to improved health outcomes.**

This year, current and former serving personnel took up the challenge to hold events during VHW that promoted the importance of nutrition. A range of events including supermarket tours, visits to community gardens, healthy lunches and BBQs, cooking demonstrations, cook-offs, and talks by dietitians and nutritionists were held nationally from 22-30 September 2018.

The Week emphasised the key role eating well plays in reducing the risk of developing a range of chronic health conditions. We hope the events encouraged members of the veteran and ex-service communities and their families to eat better and eat smarter. DVA thanks all ESO and community groups for providing a wonderful range of events for veterans and ex-service communities and their families during VHW.

A range of resources about nutrition are available on the DVA website and you can download delicious and healthy recipes developed by Tara Diversi, DVA's Dietetics Adviser. Tara also recorded some videos on nutrition which you can access on DVA's YouTube channel youtube.com/user/DVAAus

Planning is already underway for VHW in 2019 and the theme will be mental wellness. Please contact your local VAN & Community Support team to start planning your event.

www.dva.gov.au/vhw Ph: 1800 555 254



LUNCH AT WORK

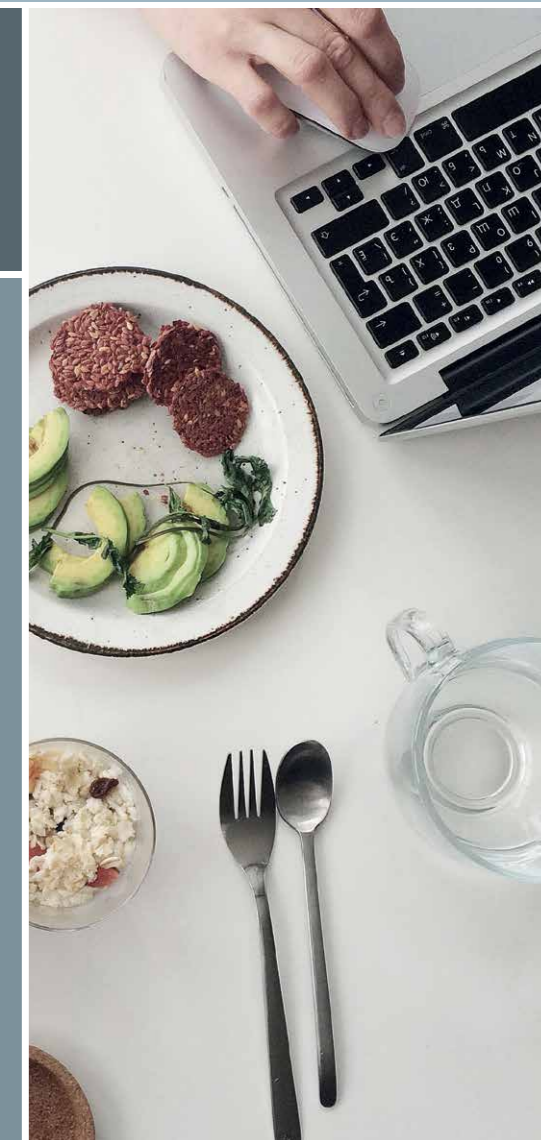
Eat lunch every day – it will give you the energy you need to work through the afternoon. One of the best ways to make sure you have a healthy lunch is to pack your own.

Leftovers from dinner make an easy work lunch option. Cook a bit extra to be sure you have some left for lunch.

Choose a lunch that gives you the energy that you need. If you have a highly physical job, you will need more lunchtime kilojoules than someone who has a sedentary office job.

Did you know lunch is just as important as breakfast? In other words, don't skip lunch: you need it every day! A nutritious lunch will give you the energy to get through an afternoon of work without wanting snacks from the vending machine.

One of the best ways to get a healthy lunch at work is to pack your own.



IDEAS FOR YOUR WORK LUNCHBOX A 9 - STEP PLAN

LET'S LOOK AT A 9-STEP PLAN TO A GREAT LUNCH:

1. **Choose a carbohydrate as the base: rice, couscous, polenta, pasta, wholegrain Bread, bread roll, wrap, pita bread, potato**
2. **Select some salad vegetables: capsicum, cucumber, cherry tomatoes, baby spinach leaves, asparagus, avocado, corn kernels, carrots, cooked pumpkin, red onion, lettuce, rocket leaves.**
3. **Choose some flavour foods: olives, capers, pickles, nuts, seeds, eggs.**
4. **Choose a dairy item: feta cubes, mozzarella balls, cheddar slices, goat cheese, cottage cheese, ricotta.**
5. **Choose a fish or meat: smoked salmon or trout, canned tuna or salmon or sardines, ham, sliced beef or lamb, preserved meat (such as salami or prosciutto), sliced meatballs, cold sausages.**
6. **Or, take a vegetarian option: tofu, falafel balls, butter beans, kidney beans, chickpeas.**
7. **Add a herb: coriander, basil, parsley, chives, mint.**
8. **Sprinkle with a dressing or sauce: soy sauce, chilli sauce, sesame oil, olive oil, mustard, salad dressing or vinaigrette, mayonnaise, hummus, tzatziki.**
9. **Have dessert: fruit, yoghurt, or some cheese and wholegrain crackers.**

IDEAS FOR WORK LUNCHES MADE FROM DINNER LEFTOVERS

If you're in a hurry, but you have leftovers from last night's dinner, then you have a chance to create an instant lunch:

- **Make a jaffle with a filling of spaghetti.**
- **Slice leftover meat or chicken to put on top of a salad, or in a wrap**
- **Cook up leftover vegetables mixed with some spices (like curry or cumin), and serve with Greek yoghurt and pita bread.**
- **Pop some soup in a thermos.**
- **Use leftover rice or pasta as a base for a salad.**
- **Pack up a leftover corn cob with a boiled egg, a chicken drumstick or a meatball.**

Nutrition tips for men and women

Nutrition is always different for the individual depending on their age, gender, their circumstances and lifestyle,” explains Sarah Groves, a dietitian at Peninsula Health.

Men and women often have different eating and diet habits as well as different physiological needs.

Top nutrition tips for men and women.

TIPS FOR MEN

Do more cooking at home.

“We find that men tend to do a lot less cooking than women. If people cook at home more they tend to have diets that have less fat and less sugar. Often men regularly eat convenience foods which don't place high priority on nutrition.”

Eat fruit

“Men tend to eat a bit less fruit so we encourage them to have fruit as a snack.”

Be sure to eat a variety of meat types

“Often men tend to go for red meat most of the time, and they can choose quite fatty cuts. We encourage them to eat leaner meats, like chicken and fish, a bit more frequently or even have some vegetarian style meals as well.”



TIPS FOR MEN AND WOMEN

Eat more vegetables

“We encourage everyone to really boost up their veggie intake - that's the main thing that will help someone's health through nutrition.”

Try not to use food as a comfort tool

“We see emotional eating in men and women. Food is often used as a comfort tool. We see people that may have quit smoking, cut back on alcohol and food is kind of the third crutch.”

Eat regular meals and snacks to avoid non-hungry eating

“Have regular meals and snacks during the day. Often we see people who are eating a lot at night and then then they try and make up for it by not eating much during the day which perpetuates the cycle of getting hungry at night.”

Find other ways to de-stress at night other than with food

“We encourage people to find an activity they enjoy to reduce stress at night. It might be exercise or a hobby - some people play music or do craft or build things and that takes them away from whatever is stressing them and also isn't food.”

TIPS FOR WOMEN

Be sure to have enough calcium

“Women have an increased risk of osteoporosis so it's important to have good sources of dairy in their diet.”

Be careful when swapping dairy products for alternatives

“Sometimes women swap out dairy products for alternatives like soy or almond, thinking it's healthier. They're really good alternatives if they're intolerant to lactose but they're not always equal in calcium.”

Try not to label foods as good and bad

“Sometimes women put labels on foods such as good and bad, which can be quite harmful for how they're thinking about their food. Sometimes we lose a bit of perspective on the values foods bring us as well - we should be eating to maintain our energy levels and our muscles and our bones.”

IMAGE OF MANDARINES BY PIXABAY FROM PEXELS



Sarah Groves is a dietitian in the Community Health Team at Peninsula Health.

FIVE, TEN AND 15 YEAR RECOGNITION FOR MHPE VOLUNTEERS

A NUMBER OF MHPE VOLUNTEERS HAVE ACHIEVED FIVE, 10 AND 15 YEARS OF ACTIVE SERVICE. A BIG THANK YOU TO ALL THE VOLUNTEERS BELOW FOR YOUR CONTRIBUTION TO THE HEALTH AND WELLBEING OF THE VETERAN AND EX-SERVICE COMMUNITY.

FIVE YEARS

Peter Sutton	ACT
Terry Inglis	NSW
Trevor Plymin	NSW
Terrence Charles	QLD
Jacky Von Zedlitz	QLD
Ian Ward	QLD
Richard Kirkman	SA
Hugh Morrison	VIC
James Anderson	WA
Gilbert Bulliard	WA
Glenda Dawson	WA
Judith Firth	WA
Stephen Hu	WA
Phillip Lear	WA
Cathleen Quinn	WA
John Sharp	WA
William Southall	WA
Ashley Urquhart	WA

TEN YEARS

Kerry Boyce	NSW
Bob Harper	NSW
Robert Hicks OAM	NSW
Christine Kidd	NSW
Richard Kidd	NSW
Lou Micallef	NSW
Sam Vecchio	NSW
Brian Walters	NSW
Warren Cockburn OAM	QLD
Don Davey	QLD
William Fox	QLD
Ray Barling	VIC

FIFTEEN YEARS

Max Mullinger	QLD
Alan Ross	QLD
Nola Alabisi-O'Shea	WA
John Schnaars	WA
Howard Cock	WA
Phil Quartermaine	WA

FORGOTTEN ANYONE? IF YOU'VE BEEN WITH MHPE FOR FIVE OR TEN YEARS AND HAVEN'T RECEIVED YOUR MHPE VOLUNTEER CERTIFICATE AND BADGE, PLEASE CONTACT YOUR MHPE STATE COORDINATOR. MHPE VOLUNTEERS COME FROM ALL AREAS OF AUSTRALIA, AND RECEIVE TRAINING BY DVA TO DISCUSS HEALTH AND LIFESTYLE ISSUES WITH THEIR PEERS, AND TO RAISE THE AWARENESS OF MEN'S HEALTH IN AUSTRALIA AMONG VETERANS AND THE EX-SERVICE COMMUNITY IN PARTICULAR.

MHPE NATIONAL ROUND UP

From MHPE Queensland

There have been some staffing changes in the QLD Community Support Team. In April, we farewelled Community Support Adviser Carly Clyant, who moved interstate. A big thank you and our combined best wishes went to Carly for her cheery dedication and hard work with the Men's Health Peer Education and Community Support in general. Many of our MHPE volunteers met Carly at our February 2018 Recall and got to know her as she led us through a mindful eating exercise which involved chocolate.

In May, we welcomed Danae Gread into that role. Danae has quickly picked up the work, and has been very involved in the work of the Men's Health Peer Education, including the planning and work behind Veterans Health Week 2018 (VHW). Danae brings with her a wealth of experience and knowledge in the health promotion field and has already been in contact with many of you regarding VHW. Danae lives with her husband Mark and two small children in Brisbane's north and loves to travel and is keen cook.

A number of MHPE volunteers have applied for, and will be either running, attending or supporting VHW events during the week, which runs between 22 and 30 September 2018. Check the DVA website (dva.gov.au) for information about events near you.

Please contact the Queensland Community Support team if you have any questions or need any MHPE items. We can assist with health promotion ideas, information about grants and requests for workshops. We'd love to hear from you and welcome your phone calls and suggestions at any time.

Either email the Community Support inbox (CSA.QLD@dva.gov.au) or phone us on 07 3223 8715.

MHPE Northern Territory

Continuing the success of previous events, a Pit Stop event was held in Darwin CBD during Men's Health Week on Friday 15 June. Coordination of the event was undertaken by DVA in conjunction with Men's Health Strategy Unit NT. The Cancer Council and Heart Foundation also provided support.



NT Community Support Advisor, Jacqueline Cleghorn performing a waist circumference test.



Heart Foundation's Margaret Williams assisting at the 'oil pressure station' for the 2018 Men's Health Pit Stop Darwin.

The event has grown over the past few years with increased involvement from health providers in the Darwin region including Headspace, Danila Dilba and NT Quitline. This year also included rowing machines supplied and supervised by a local gym to promote the importance of exercise. It was fun to see a competitive edge from some of the younger men trying to beat each other's time for a prize.

Again, there were several interstate travellers who participated and enjoyed the friendly environment. One of these commented that 'without DVA, I wouldn't be alive today'. He had required extensive, emergency medical treatment which was accessed quickly and easily through his Gold Card. Both he and his wife expressed their thanks for the support they have received.

Two of our MHPE volunteers, Mark Keynes and Ron Blanchard, assisted on the day and thoroughly enjoyed their involvement. Many participants commented on what a good initiative the program is and were grateful to receive the information.

MHPE NATIONAL ROUND UP

MHPE WA



RECALL TRAINING

A one day recall training workshop was held in the Perth Head Office during Men's Health Week on the 12th June. 18 volunteers attended on the day. A number of volunteers gave inspiring presentations on their MHPE work over the past 12 months, it was wonderful to hear how their work has made a difference in many veterans' lives. An interactive presentation was also given on the My Service application and discussions were held around Veterans Health Week; volunteers were given ideas for the nutrition focused theme so we look forward to attending and assisting with a number of events! The main focus for the day was Pit Stop training; topics chosen were linked to nutrition and the link between a poor diet and chronic disease. Volunteers had a hilarious time measuring each other's waists and discussing their bowel and prostate issues! We hope to see a few Pit Stop "pop-ups" within the coming months.

IMAGE ABOVE LEFT
Participants at WA Recall Training

POP UP'S

Fortnightly "pop-ups" continue to operate in the North of Perth at Banksia Grove Shopping Centre; outside Friendlies Chemist and in the East of Perth at High Wycombe Shopping Centre; outside Friendlies Chemist. Friendlies Chemist have been a wonderful supporter of the MHPE program. An additional pop-up has been established at Banksia Grove Shopping Centre on a fortnightly basis outside Woolworths. There is a regular group of volunteers who assist at these "pop-ups" on consistent basis.

KALAMUNDA SHOW - 14TH APRIL

MHPE volunteer Deb Stirk organised an MHPE information stall to be held at the Kalamunda Show on April 14th. Deb worked together with the local scout group and other MHPE volunteers to hold an information table showcasing MHPE and DVA information and resources.

MHPE VICTORIA

Victorian MHPE volunteers have continued to contribute positively to a range of events throughout the state.

Rob Bailey supported the Chelsea RSL and marched with veterans on Anzac Day, which was a well-attended event.



Left to right: Kate, exercise physiologist; Alan, MHPE volunteer; and David, urology nurse.

Alan White, in conjunction with the Bayside-Kingston prostate cancer support group, ran an information evening on 13 June 2018 called 'Prostate Cancer and You' for Men's Health Week 2018.

There were plenty of questions from members of the audience. Attendees received information packs from Andrology Australia, Prostate Cancer Foundation of Australia, Check Your Tackle and Cancer Council Victoria.

On 15 June 2018, Marty Tanzer hosted a men's health information stall at the Sale Bunnings store, where information about men's health was distributed.



Left to right: Joel, Bunnings staff member; MHPE volunteer, Marty; and customer, Turk

Marty, as the President of the Sale RSL, has helped secure health and wellbeing funding for a sporting equipment library. The equipment will be a valuable resource for the veteran community in the Sale area.

Many volunteers are working with their local communities for the upcoming Veterans' Health Week (22-30 September 2018). Some examples include Gary Treeve assisting the Albury RSL and Marty Tanzer hosting an event at the Sale RSL.

These events and initiatives are just a snapshot of the excellent work undertaken by our volunteers to engage the veteran community by promoting health information.

MHPE NSW/ACT



COFFS HARBOUR / PORT MACQUARIE RECALL DAY AND PHOTO CHALLENGE!

On 29 May MHPE recall training was held at Coffs Harbour. DVA also hosted a grant information session for volunteers and the broader ESO community in the area. The volunteers undertook our brand new MHPE National Photography Recall Topic during the training, and then we put our training into practice to attempt taking the perfect group photo. We are very proud of the result and would like to challenge any other MHPE group doing this recall topic to compose a better group photo for the National Round up!

IMAGE ABOVE LEFT
MHPE volunteers practice group photo composition.

SGT MATTHEW MG LOCKE CHARITY FOOTBALL MATCH - BELLINGEN

... is held every year. This year's match was held on 24 February 2018. The match includes ADF and civilian teams. This year's line-up featured the Navy Tridents, Women's League, Army Thunder and the Bellingen Magpies. Matthew Locke served with the Special Air Service and was killed in action in Afghanistan in 2007. His friends and family have established a charity in his memory which raises funds for children's charities in the countries where he served. The Coffs Harbour chapter of MHPE volunteers get involved each year by holding an information stand to network, provide information and encourage the many serving and ex-serving attendees to look after their own health and wellbeing. Congratulations Wally Sweet, Spot Swales, Graham Franklin, Bob Crisp on getting on board with this community event.

OLD BAR SENIORS EXPO

This event was started in 2016 in partnership with Old Bar Men's Shed by John Macartney, MHPE Volunteer extraordinaire and NSW State Representative. The first event was underwhelmed with very low attendance. Never one to give up easily John kept working on it and learnt from past mistakes, and persistence paid off. This year's expo was a huge success with more than 40 exhibitors. Participants included community and health groups including aged-care groups, Community Nursing, Department of Human Services, Legal Aid, local council police, and of course ex-service groups. Thanks to John for making it the vibrant activity it is today!

DEFENCE DCO WELCOME DAY - HMAS ALBATROSS - NOWRA

In February, MHPE volunteers and DVA staff attended the DCO Family Welcome day at HMAS Albatross. The volunteers spent an enjoyable day liaising with current serving members and their families and providing health promotion information as well as welcome information about happenings in the local community. Highlights of the day included the arrival of Army parachutists and a photo opportunity with the base's CO, Captain Fiona Sneath.

IMAGE ABOVE RIGHT
Left to right: Gary Tearle, Captain Fiona Sneath, Kevin Camm, Terry Wright (volunteer in training).

MHPE NATIONAL ROUND UP

MHPE SOUTH AUSTRALIA ROUND-UP

RECALL TRAINING 16 MAY 2018

The focus of recall training was on the 2018 Veterans' Health Week (VHW) theme of nutrition. A highlight of the day included a cooking demonstration held over lunch. Trevor Klose provided 1 kilogram of crab meat, which was made into a delicious and simple to prepare pasta with crab and chilli dish by MHPE 'chefs' Gareth Hubbard, Ron Boyce and Community Support team member Ana Teleki. A delicious home-prepared Thai green curry was made by John Hunter and received the thumbs up from all. Bronwyn McGree from the VAN team prepared some rice to accompany John's meal and taught us all how to make two-ingredient naan bread. Recipes for all the dishes were provided to the volunteers to take away and try their cooking skills at home.

All the volunteers pitched in to help with the tidying and washing-up after our yummy lunch! The training included discussion on VHW event ideas, nutrition quizzes and the VAN team prepared examples of community nutrition information resources that the volunteers could source.



Left to right: Ron Boyce and Gareth Hubbard (MHPE Volunteers) and Ana Teleki (VAN Community Support) preparing the crab and chilli pasta dish.

MHPE VOLUNTEERING FIVE-YEAR MILESTONE

Congratulations to SA MHPE Volunteer Representative Richard Kirkman on his five-year certificate of MHPE volunteering achievement. Richard has been a very active volunteer since joining the program, taking part in many VHW events and supporting the VAN Community Support team at various ADF and ESO organised events. Richard has for a number of years been providing social support to veterans at RSL Care as part of his MHPE role. Richard in his role as Volunteer Representative has attended the DVA MHPE National Workshop and also the 2017 Australian Men's Shed Association National Conference. Well done Richard for all your volunteering contributions over the years! Richard's certificate was presented to him at the National Volunteer Week Parade held in SA.



Left to right: Bob Kelly and Richard Kirkman (MHPE volunteers) at the Torrens Parade Ground after the certificate had been presented to Richard.

NATIONAL VOLUNTEER WEEK PARADE

On 21 May the annual SA Volunteer Week Parade organised by Volunteering SA & NT saw MHPE volunteers Richard Kirkman, Bob Kelly and DVA Community Support Advisor Neil Davies fly the MHPE banner to promote the good work of all their fellow volunteers. It was the biggest parade yet, with more than 1000 registrations to participate in the parade. The parade began at the Torrens Parade Ground which is the HQ of many peak ESOs in Adelaide, and wound its way up through the CBD to Victoria Square where celebrations took place to acknowledge all the great work volunteers do in their local communities.



Left to right: Richard Kirkman, Bob Kelly (MHPE volunteers) participating in the parade.

MEN'S HEALTH WEEK MEN AND FAMILIES MAKING HEALTH CONNECTIONS 1-17 JUNE 2018

As part of Men's Health Week, volunteers Ray Benzie and Bob Kelly attended a Men's Health Luncheon for blokes over 50, organised by the City of Salisbury Council which was held at the local Jack Young Centre in Salisbury. Bob and Ray oversaw an information stand of various MHPE and DVA health and wellbeing resources to promote to the veteran community in attendance. It was one of many stands on the day that provided information on keeping healthy and connected in Salisbury. The event was well attended and included health checks by Uni SA Allied Health students for blood pressure and diabetes risk assessment. Guest speakers covered a diverse range of topics including men and mental wellbeing, gardening and 'sliding doors' moments in life.

WALK FOR A VETERAN WITH PTS

The annual Walk for a veteran with PTS was held on Saturday 28 July 2018 from 6am to 4pm. The event saw participants walk 14, 27 or 42 kilometres from Seacliff to Largs Bay to Henley Beach. The significance of the 42-kilometre walk is in acknowledging the service and sacrifice of the 42 ADF personnel killed in Afghanistan. The event aims to raise awareness around post-traumatic stress and the impact it has on those within the Defence Force and emergency services while serving the community.

MHPE volunteers will be taking part in the walk joining current and ex-serving ADF personnel and their families and the emergency services community. The volunteers will also be helping the VAN Community Support team with an information stand of DVA resources located at the Henley and Grange RSL.

The event is in its third year and has become a significant event widely promoted throughout the veteran community which has seen a significant increase in participants this year. The walk will feature former Rugby League star and mental health speaker Joe Williams, Re-enact SA, Barossa Light Horse Historical Association and is supported by many local ESOs.

VETERANS' HEALTH WEEK 2018

Every year VHW is supported by the SA MHPE volunteers and this year saw a number of events organised by volunteers. Those volunteers not organising events have committed to supporting the nutrition-themed week by attending events and helping to promote health and nutrition messages to those attending.

NUTRITION APPS



8700

(free, Apple & Android):

The average Australian adult consumes about 8700 kilojoules (kJ) a day, and this very popular app developed by the NSW Government (with more than 100,000 downloads to date) will help you find your ideal daily kJ figure to maintain a healthy weight. 8700 will also help you calculate how much energy to burn through everyday activities and exercise, plus it will convert those pesky calories to kJ (and vice versa). With the ability to also search more than 3000 fast foods, there is now no excuse not to be informed about healthy nutrition choices.



Food Switch

(free, Apple & Android):

Food Switch is an Australian-based app that allows you to take some very easy steps to maintain better health outcomes by reducing fat, salt and sugar in your diet. Through your device's camera, users only need to scan barcodes of packaged foods to determine what's in their food. You will be able to view similar foods with healthier ingredients, which is handy for all, but especially those with high cholesterol, high blood pressure or gluten intolerance. The nutritional information comes in two handy modes - traffic light labels and health star ratings. Switching food has never been easier!



Calorific

(free, Apple & Android):

Of the many apps I've reviewed, this would be one of my all-time favourites. While everyone talks about or quotes calories, this very simple to use app answers this basic question: what exactly does 200 calories look like when viewed as food? Why 200 calories? Because that is seen as a decent portion size, and makes it easy to check when you're looking at nutritional information on labels. You can upgrade within the app to unlock more photographs (which are a feature in themselves), but the free version is adequate for most purposes. Sad to say (for me anyway), 200 calories is a whole lot of spinach, but only half a spoon of peanut butter. In any case, become better informed with Calorific.



Calorie King

(free, Apple & Android):

I'm hoping you won't need to check all the Australian foods in the database within Calorie King, but if you do, you have more than 26,000 to choose from! You will be able to compare many different types of food (including many from fast food chains and restaurants) by their calories, kilojoules, carbs or fat content. Choose a particular food and even more information on protein, fibre, saturated/trans fat, sodium and cholesterol is then available. This app developer's mission is to provide the best information, tools and education to help in making better food choices.

WHAT ARE THE AUSTRALIAN DIETARY GUIDELINES?

The Australian Dietary Guidelines provide up-to-date advice about the amount and kinds of foods that we need to eat for health and wellbeing. They are based on scientific evidence and research.

The Australian Dietary Guidelines of most relevance to adults are included below:

GUIDELINE 1:

To achieve and maintain a healthy weight, be physically active and choose amounts of nutritious food and drinks to meet your energy needs.

- Older people should eat nutritious foods and keep physically active to help maintain muscle strength and a healthy weight.

GUIDELINE 2:

Enjoy a wide variety of nutritious foods from these five food groups every day:

- Plenty of vegetables of different types and colours, and legumes/beans
- Fruit
- Grain (cereal foods, mostly wholegrain and/or high cereal fibre varieties, such as breads, cereals, rice, pasta, noodles, polenta, couscous, oats, quinoa and barley)
- Lean meats and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans
- Milk, yoghurt, cheese and/or their alternatives, mostly reduced fat And drink plenty of water.

GUIDELINE 3:

Limit intake of foods containing saturated fat, added salt, added sugars and alcohol.

- Limit intake of foods high in unsaturated fat such as many biscuits, cakes, pastries, pies, processed meats, commercial burgers, pizza, fried foods, potato chips, crisps and other savoury snacks.
- Replace high fat foods which contain predominantly saturated fats such as butter, cream, cooking margarine, coconut and palm oil with foods which contain predominately polyunsaturated and monounsaturated fats such as oils, spreads, nut butters/pastes and avocado.
- Limit intake of foods and drinks containing added salt.
- Read labels to choose lower sodium options among similar foods.
- Do not add salt to foods in cooking or at the table.
- Limit intake of foods and drinks containing added sugars such as confectionery, sugar-sweetened soft drinks and cordials, fruit drinks, vitamin waters, energy and sports drinks.
- If you choose to drink alcohol, limit intake. For women who are pregnant, planning a pregnancy or breastfeeding, not drinking alcohol is your safest option.

GUIDELINE 4:

Encourage, support and promote breastfeeding.

GUIDELINE 5:

Care for your food: prepare and store it safely.

For further information visit: www.eatforhealth.gov.au Source: National Health and Medical Research Council

FOODS TO LIMIT: DISCRETIONARY CHOICES

'Discretionary choices' are called that because they are not an essential or necessary part of our dietary patterns. Discretionary foods are high in kilojoules, saturated fat, added sugars, added salt or alcohol. If chosen, they should be eaten only sometimes and in small amounts.

Examples of discretionary choices include:

- Sweet biscuits, cakes and desserts
- Processed meats and sausages
- Ice-cream, confectionary and chocolate
- Meat pies and other pastries
- Commercial burgers, hot chips, and fried foods
- Crisps and other fatty and/or salty snacks
- Cream and butter
- Sugar-sweetened cordials, soft drinks, fruit drinks and sports drinks
- Alcoholic drinks

For further information visit: www.eatforhealth.gov.au Source: National Health and Medical Research Council

Refer to the Australian Guide to Healthy Eating insert to view the discretionary foods that you should eat only sometimes and in small amounts.

WHICH FOODS SHOULD I EAT AND HOW MUCH?

The Australian Dietary Guidelines provide up-to-date advice about the amount and kinds of foods and drinks that we need regularly for health and well-being.

By eating the recommended amounts from the Five Food Groups and limiting the foods that are high in saturated fat, added sugars and added salt, you get enough of the nutrients essential for good health. You may reduce your risk of chronic diseases such as heart disease, type 2 diabetes, obesity and some cancers. You may also feel better, look better, enjoy life more and live longer!

The amount of food you will need from the Five Food Groups depends on your age, gender, height, weight and physical activity levels, and also whether you are pregnant or breastfeeding. For example, a 43-year-old man should aim for 6 serves of vegetables a day, whereas a 43-year-old woman should aim for 5 serves a day. A 61-year-old man should aim for 6 serves of grain (cereal) foods a day, and a 61-year-old woman should aim for 4 serves a day. Those who are taller or more physically active (and not overweight or obese) may be able to have additional serves of the Five Food Groups or unsaturated spreads and oils or discretionary choices.

For further information go to www.eatforhealth.gov.au

WHAT ARE THE AUSTRALIAN DIETARY GUIDELINES? CONTINUED

HOW MUCH IS A SERVE?

It's helpful to get to know the recommended serving sizes and serves per day so that you eat and drink the right amount of the nutritious foods you need for health. The 'serve size' is a set amount that doesn't change. It is used along with the 'serves per day' to work out the total amount of food required from each of the Five Food Groups. 'Portion size' is the amount you actually eat and this will depend on what your energy needs are. Some people's portion sizes are smaller than the 'serve size' and some are larger. This means some people may need to eat from the Five Food Groups more often than others.



HOW MANY SERVES A DAY?

Few people eat exactly the same way each day and it is common to have a little more on some days than others. However, on average, the total of your portion sizes should end up being smaller to the number of serves you need each day.

If you eat portions that are smaller than the 'serve size' you will need to eat from the Food Groups more often. If your portion size is larger than the 'serve size' then you will need to eat from the Food Groups less often.

To meet additional energy needs, extra serves from the Five Food Groups or unsaturated spreads and oils, or discretionary choices may be needed only by those adults who are taller or more active, but not overweight.

For meal ideas and advice on how to apply the serve sizes go to: www.eatforhealth.gov.au

GETTING THE RIGHT DIETARY ADVICE

Getting the right food and nutrition information is very important when it comes to looking after all aspects of your health and wellbeing. An Accredited Practising Dietitian is a university trained health professional who translates scientific nutrition information into practical advice, to help you make the right decisions about what to eat.

There are no rules governing the use of the terms 'dietitian' and 'nutritionist'. The latter term can be used by people with limited nutrition training. Also, there are many nutrition focused industries and practitioners in Australia (for example, media, pharmacy and weight loss product companies)

providing general advice, often for profit, rather than specifically focusing on how to best help you with your health.

For a balanced assessment, an Accredited Practising Dietitian is preferable as they have had the training in human nutrition including substantial theory and supervised professional practice in clinical nutrition, medical therapy and food service management. Therefore in Australia, all dietitians are considered nutritionists, however, nutritionists without a dietetic qualification cannot take on the specialised role of a dietitian.

A DIETITIAN CAN PROVIDE ADVICE ABOUT:

- How to manage your health through dietary and nutritional support. This may involve you modifying your food and/or supplement intake.
- Weight loss and gain
- Nutritional needs for all age groups
- The right types and quantities of food and drinks
- Shopping for food and understanding food labels
- Food preparation and cooking skills
- Meal ideas and recipes
- How to adjust your diet for specific health concerns and conditions.

If you are unsure what changes you can make to improve your nutritional intake and reduce the risk chronic diseases such as heart disease, type two diabetes, some cancers and obesity, visit your GP to discuss your own personal needs and circumstances. If required, your GP can provide you with a referral to an accredited practicing dietitian.

For further information visit: www.eatforhealth.gov.au
Source: National Health and Medical Research Council

The Australian Healthy Food Guide Healthy servings at a glance poster, which is included with your magazine, provides useful images to help you understand what a serving size really is for different foods. It's a practical guide as it's not always easy (or convenient) to weigh and measure food before you eat.

A standard serve of vegetables is about 75g (100-350kJ) or:

% cup cooked green or orange vegetables (for example, broccoli, spinach, carrots or pumpkin)

% cup cooked, dried or canned beans, peas or lentils
1 cup green leafy or raw salad vegetables

% cup sweet corn

% medium potato or other starchy vegetables (sweet potato, taro or cassava) 1 medium tomato

SERVES PER DAY

MEN	WOMEN	
6	5	19-50 years
5	5	51-70 years
5	5	71+ years

A standard serve of fruit is about 150g (350kJ) or:

1 medium apple, banana, orange or pear 2 small apricots, kiwi fruits or plums

1 cup diced or canned fruit (with no added sugar)

Or only occasionally:

125ml (% cup) fruit juice (with no added sugar)

30g dried fruit (for example, 4 dried apricot halves, 1% tablespoons of sultanas)

SERVES PER DAY

MEN	WOMEN	
2	2	19-50 years
2	2	51-70 years
2	2	71+ years

A standard serve of grain (cereal) foods, mostly wholegrain and/or high cereal fibre varieties (500kJ) is:

1 slice (40g) bread

% medium (40g) roll or flat bread

% cup (75-120g) cooked rice, pasta, noodles, barley, buckwheat, semolina, polenta, bulgur or quinoa

% cup (120g) cooked porridge 2/3 cup (30g) wheat cereal flakes 1/4 cup (30g) muesli

3 (35g) crisp breads 1 (60g) crumpet

1 small (35g) English muffin or scone

SERVES PER DAY

MEN	WOMEN	
6	6	19-50 years
6	4	51-70 years
4	3	71+ years

A standard serve of lean meat and poultry, fish, eggs, tofu, nuts and seeds, and legumes/beans (500-700kJ) is:

65g cooked lean meats such as beef, lamb, veal, pork, goat or kangaroo (about 90-100g raw). Weekly limit of 455g

80g cooked lean poultry such as chicken or turkey (100g raw)

100g cooked fish fillet (about 115g raw weight) or one small can of fish 2 large (120g) eggs

1 cup (150g) cooked or canned legumes/beans such as lentils, chick peas or split peas (preferably with no added salt)

170g tofu

30g nuts, seeds, peanut or almond butter or tahini or other nut or seed paste (no added salt)

SERVES PER DAY

MEN	WOMEN	
3	2%	19-50 years
2%	2	51-70 years
2%	2	71+ years

A standard serve of Milk, yoghurt, cheese and/or alternatives, mostly reduced fat (500-700kJ) is:

1 cup (250ml) fresh, UHT long life, reconstituted powdered milk or buttermilk

% cup (120ml) evaporated milk

2 slices (40g) or 4 x 3 x 2cm cube (40g) of hard cheese, such as cheddar

% cup (120g) ricotta cheese

% cup (200g) yoghurt

1 cup (250ml) soy, rice or other cereal drink with at least 100mg of added calcium per 100ml

SERVES PER DAY

MEN	WOMEN	
2%	2%	19-50 years
2%	4	51-70 years
3%	4	71+ years

DVA National 10,000 steps challenge

2018 - ARMISTICE DAY



November 2018 marks the centenary of the First World War Armistice and victory to the Allied Forces. As the series of Centenary of ANZAC commemorative events draws to a close, DVA will be coordinating its third 10,000 steps challenge. The theme for this year's walking challenge is the ANZAC contribution to the end of the First World War and is scheduled to kick off on 11 November 2018 and finish on 8 December 2018.

WELCOME BACK

The broader veteran community, including current serving members and families, are warmly welcomed back as we commemorate more than 100 years of ANZAC service through this fun and engaging National 10,000 steps walking challenge.

Last year saw the largest number of ex-service organisations (ESO) and ADF members lining up for the glory of being announced as national champions. The two current champion teams are firmly holding on to their trophies, but will 2018 see them retain their titles, or are there two new champion teams waiting in the wings?

State pride is on the line, but there can be only one state/territory named as the overall winner. Queensland won the inaugural title, NSW won the title in 2017, who will it be in 2018?

Follow all the action on the DVA 10K steps page - www.dva.gov.au/10Ksteps.



IMAGE ABOVE: National ADF & overall winning team 2017, RDW, Kapooka, with their prizes and the ADF 10,000 steps trophy.



IMAGE ABOVE: National ESO winning team 2017 Bayside Blitz team, holding the ESO 10,000 steps trophy on behalf of Swansea RSL Sub-Branch

HISTORY OF MHPE SHOPFRONT FORRESTFIELD 2010-17



At the heart of every MHPE volunteer is the passion to give their time and help veterans of any era. One example of this is the Forrestfield shopfronts that were set up to give veterans a place to get information but also to be able to spend time with mates.

This is a perfect time, with the shop's closure in 2017, to be able to look back and celebrate not only the shop's achievements but also the vision and work of the three main volunteers who managed to get the shops up and running, and continue to give service to veterans after many years.

In early September 2010, Phil Quartermaine approached Lester Leaman with the idea of starting a shopfront at the Wycombe Pharmacy and suggested that this would be an ideal situation for it. This was the beginning of a series of shops in various forms.

Phil, Peter Cowley and Lester had a meeting with the Wycombe Pharmacy owner Maria So and discussed what the rooms would be used for. DVA was then asked to be involved through Lester as the State Rep. Jumae (DVA) then held discussions with national and state DVA staff and developed a Memorandum of Understanding for MHPE to use the rooms as a veteran centre.

The shopfront began business on 28 October 2010 with the following members in attendance: Phil, Peter John and Nola O'Shea and Lester. The first topics presented were independent living and wound management. Other presentations were presented over time until 14 July 2011.

2011 was a busy year with the MHPE group being named in Parliament and the start of the plan to move premises. Phil advised that the group would have to move from the pharmacy and Peter Cowley approached the centre manager of the Forrestfield Shopping Centre about the possibility of using one of the vacant shop areas. Talks

were held between all parties and the keys for Shop 31F were handed over on 28 July. The shop opened for business on 1 September 2011.

Phil Quartermaine resigned due to health issues and had a farewell from the Shop on 9 February 2012 and was thanked for the initiative of starting the first shop at the pharmacy and for all the hours that he had given to MHPE.

October 2015 was the fifth birthday of the forming of the MHPE Shopfront concept. The shop was bursting at the seams with people there to celebrate and congratulate the members for the success of the idea. Certificates were given out to various people including Ken Wyatt MP (who opened the present shop) Nathan Morton (supporter of the shop) DVA's WA Deputy Commissioner Peter King (ongoing support) Phil Quartermaine (original shop initiator) Peter Cowley (Forrestfield Shop Initiator) Jude Firth (MHPE Advocate).

The shop continued as a place for older veterans to drop in and have a coffee (one of them always bought the most beautiful homemade scones), a place for the general public to ask questions and a valuable resource area for all veterans regarding DVA processes and claims.

In February 2015 the Shopping centre was sold and the lease for the shop ran out on 26 April 2015. Various leases for different time lengths were signed between DVA and the shopping centre owners until eventually the lease finished on 20 April 2017.

Although the shop has now closed the Forrestfield group continue to meet on a regular basis to discuss and plan upcoming events.



GPs

The one-off ADF Post-discharge GP Health Assessment is funded under Medicare Benefit Scheme (MBS) numbers 701, 703, 705 and 707.

The tool used to perform the assessment is in the Best Practice and Medical Director Software or you can download the PDF from the At Ease website:

at-ease.dva.gov.au > Professionals.



one-off ADF POST-DISCHARGE GP HEALTH ASSESSMENT

Do you get your car serviced? How often? Would you drive your car while it made a strange noise, or would you take it to get checked?

If you take your car for a checkup, why not get yourself one too?

If you served in the Australian Defence Force (ADF) you can access a comprehensive one-off health assessment from your general practitioner (GP). The health assessment has been designed specifically for you. It helps your GP identify the early onset of any physical or mental health conditions. It can also help your GP to provide you with treatment or refer you to other services.

It doesn't matter whether you left the ADF a year ago or 20 years ago – there are no time restrictions for accessing the assessment.

When you make the appointment let your GP's receptionist know that you have served in the ADF and that you would like to access the one-off ADF Post-discharge GP Health Assessment. You can bring this page to your appointment – there's information for your GP on the opposite side.

If you have a DVA health card (white or gold card), present it when you would normally pay and DVA will cover the cost of the assessment.

If you do not have a DVA health card, you can access the health assessment with your Medicare card. When you use a Medicare card, your GP may decide to bulk bill and that means there will be no cost to you. If your GP charges a fee that is higher than the rebate, you will only need to pay for the gap.



MHPE VOLUNTEERS - WHAT DO THEY DO?

MHPE VOLUNTEERS SHARE HEALTH INFORMATION. FOR EXAMPLE: ONE-ON-ONE CHATS; HEALTH WEEK EVENTS; WORKING WITH MEN'S SHEDS; DISTRIBUTING HEALTH INFORMATION; RUNNING A STAND AT A COMMUNITY EXPO, OR GIVING A TALK AT A LOCAL COMMUNITY GROUP OR EX-SERVICE ORGANISATION MEETING.

TO TALK TO A VOLUNTEER, PLEASE CONTACT THE RELEVANT MHPE STATE/TERRITORY VOLUNTEER REPRESENTATIVE BELOW:

NAME	LOCATION	PHONE NUMBER	EMAIL ADDRESS
KEVIN MOSS	Queensland	0418 734 899	kevin.moss04@gmail.au
JOHN SHARP	Western Australia	08 9291 9214 or 0419 663 246	rossharp@iinet.net.au
ALAN WHITE	Victoria	(03) 9598 1007 or 0407 617 800	askypilot@bigpond.com
RON BLANCHARD	Northern Territory	08 8927 5638 or 0476 145 303	aileron@bigpond.com
RICHARD KIRKMAN	South Australia	08 8336 7082 or 0413 816 437	bkandrc@tpg.com.au
LAURIE HARRISON	Tasmania	03 6263 7038 or 0428 62 6370	rossharp@iinet.net.au
JOHN MACARTNEY	NSW & ACT	(02) 6657 4165 or 0427 787 296	jrmaca@bigpond.com

YOUR LOCAL CONTACT IS:

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DEADLINE FOR ARTICLES:
25 FEBRUARY 2019

If you'd like to share your story with our readers or have an idea for an article, we'd like to hear from you. You can email the Editor at menshealth@dva.gov.au or call the DVA General Enquiries number **1800 555 254** and ask for the MHPE National Coordinator

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