Sugar Tax: Could It Significantly Alter Malaysian Food Behaviour?
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ABSTRACT

INTRODUCTION: In the 2019 Budget speech, the Finance Minister announced the implementation of the excise tax on two categories of sugar-sweetened beverages starting from April 1st, 2019 (now postponed to July 1st), at the rate of RM0.40 per litre. The targets are manufactured ready-to-drink beverages including carbonated and flavoured drinks containing sugars more than 5g per 100ml, or fruit juices and vegetable-based drinks exceeding 12g per 100ml. It was stated in the government’s intention to promote ‘healthy eating and lifestyle’ and reduce the prevalence of overweight or obese Malaysians. With these objectives in mind, this study explores what could be the impact of the Sugar Tax policy to public health.

METHODS: Taking into accounts of the evidence found in the NHMS 2014 (Malaysian Adult Nutrition Survey), NHMS 2017 (Adolescent Health Survey) and Household Expenditure Survey 2016, prevalence, frequencies and money spent on such targeted beverages and other sugar-rich food items are analysed against the potential tax impact on food consumption behaviour and expenditure.

RESULTS: Assuming Malaysian’s behaviour is unchanged since 2014, on average the Federal Government would collect at most RM9.71 per sweetened drinks consumer per month. If a B40 household of 4 members display similar behaviour, then it would cost them more than double the monthly average household non-alcoholic beverages expenditure.

CONCLUSION: This study finds the Sugar Tax to be regressive towards the lower income households, however they could probably still afford to resume their old consumption habit since the effect of the excise tax might be just marginal.

KEYWORDS: sugar tax, sugar-sweetened beverages, food consumption, food behaviour, healthy lifestyle

Supplementary Immunisation Activities in Titiwangsa Health Office: A Preliminary Findings
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ABSTRACT

INTRODUCTION: Malaysia has adopted a goal for measles elimination by 2025. Measles control strategies such as supplementary immunisation activities (SIAs) are needed to achieve optimal immunisation coverage. Titiwangsa Health Office was identified as a pilot project for measles-SIAs in Health Department of Federal Territory Kuala Lumpur and Putrajaya based on the measles risk assessment.

METHODS: Data on the SIAs conducted in Titiwangsa Health Office from September 2018 to March 2019 was analysed.

RESULTS: A total of 13,804 children age range between six months to less than 7 years old were found during the SIAs. Of these 19,519 (89.34%) were vaccinated with monovalent measles vaccine. The number was higher among children in kindergartens and pre-schools (n=6388), followed by clinics (n=11,984) and door to door (n=1147). About 204 who missed their routine immunisation were vaccinated with DTaP (52.9%), MMR (29.9%) and Hep B (17.2%). Absent and incomplete consent form were the main reasons for not vaccinating them during the SIAs. Also, there was a reduction of number of measles cases before and after the SIAs.

CONCLUSION: SIAs have made a substantial contribution to reduce number of measles cases as well as reaching children missed by routine vaccination program. The ongoing SIAs will be completed in August 2019.

KEYWORDS: Supplementary immunisation activities, Titiwangsa Health Office, measles vaccine, measles