PH11: A Qualitative Study Exploring How School and Community Environments Shape Adolescents Food Choices

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ABSTRACT

Introduction: Food environmental factors may have some impact and contribution to poorer diet quality in Malaysia. This study explored perceived barriers and facilitators to healthy eating in school and communities among adolescents. **Methods:** A qualitative study, based on Socio Ecological Model was conducted on a purposive, multi-ethnic sample of thirty-four adolescents from four regions in Malaysia. The semi-structured and in-depth interviews were fully transcribed and analyzed qualitatively using Atlas.Ti. The transcribed data were analysed thematically into density and proximity of food outlets, availability and variety of food, food marketing and advertising. **Results:** The result revealed that multifaceted factors in food environment contributed to unfavourable patterns of dietary intake thus leading to higher body mass index (BMI). The availability and convenience of fast food outlets offering value added services such as free wi-fi are attracting the adolescents. Moreover, they offer appealing meal selections with an affordable up-size option. Adolescents also stated that having working parents contributed to the habit of eating out as they are lacking the time to prepare home-cooked food. In addition, adolescents indicated that school canteen generally sells cheap, oily and spicy food to cater the students' preference. **Conclusion:** The findings revealed an obesity-promoting environment and perceived very limited healthful options. Therefore, policy driven environmental changes as well as strategies that aid in navigating food choices in schools and communities should be intensified to ensure a healthy food environment for the adolescent.

KEY WORDS:
Qualitative study, adolescents, food environment, food choices

PH12: Comparison of Visual Acuity Measured with Different Acuity Tests for Different Age Groups

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ABSTRACT

Introduction: A patient's visual acuity (VA) may be different depending on the chart used to measure it. The purpose of this study was to compare VA scores measured with three different charts in visually normal children, young adults and older adults. **Methods:** Monocular VA was measured in children (mean age: 10.17±1.94 years old), young adults (24.33±2.5 years old) and older adults (66.33 ± 3.83 years old) with computerised Early Treatment Diabetic Retinopathy Study (ETDRS) test, Tumbling E and Lea Symbols. All charts were presented in the Bailey-Lovie format, i.e. there were five optotypes in a line, the distance between optotypes was one optotype width and each line differed by 0.1 logMAR. Letter-by-letter scoring was used to obtain VA. **Results:** There was a significant effect of age group on VA [p=0.02]. The interaction between age and chart type was not statistically significant [$F(3.76,28.2)=0.67$, p=0.61] indicating that the different VA scores obtained with different charts were similar across age groups. Post hoc test revealed that VA score with Lea symbols were significantly better (by ~0.1 logMAR, i.e. one line on the acuity chart, p=0.02) than the ETDRS and Tumbling E tests. **Conclusions:** For all age groups, VA measured with Lea symbols tends to be overestimated compared with letter, or orientation, discrimination tests. Therefore, caution must be applied when comparing acuity taken with different charts.

KEY WORDS:
Visual acuity, ETDRS chart, Tumbling E, Lea symbols