Do Features of the Food Environment have an Influence on Body Weight and Fast Food Consumption Among Adolescents in Malaysia?

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ABSTRACT

INTRODUCTION: Neighborhood food environments may be related to obesity among adolescents and be potentially related to other health disparities. Greater access to fast food outlets has been associated with less favorable diet quality and an increase prevalence of obesity. The purpose of this study was to investigate the spatial relationship between food environment features around schools with weight status and fast food consumption among adolescents. METHODS: This is a cross sectional study with 995 adolescents who were and completed a questionnaire on sociodemographic information, fast food intakes besides height and weight measurements. Geographic Information System was used to geocode for spatial cluster analysis with a 400 and 800-m-radius buffer around each school. We examined the relationship between the presence of fast food outlets with fast food consumption and BMI using multivariate analysis. RESULTS: Fast food outlets density was not associated with BMI. BMI z-scores were positively associated with the presence of fast food outlets within a 1.6km buffer. Spatial analysis showed no significant difference in food environment features and weight status among adolescents. The results showed the median distance from any school in urban areas to the nearest fast food outlets was 0.52km and about a third of schools were surrounded by at least one fast food outlets within 800m. CONCLUSION: Although a negative association between density of fast food outlets with weight status among adolescents was observed, policies and interventions that encourage adolescents and parents to eat at home could serve as effective prevention against a poor diet.

KEYWORDS: Food environment, obesity, adolescents, fast food, Geographic Information System (GIS)

Does a Structured Module Program for the Elderly Works? The Kuala Pilah Experience.

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ABSTRACT

INTRODUCTION: This is a review on the implementation and progress of a structured module program implemented in Kelab Warga Emas (KWE) Health Clinic Kuala Pilah. METHODS: Module was conducted from March 2018 till present. Recruitment done by universal sampling among elderly registered under KWE. Only active members were selected. They underwent a five components module, each assessed by the following tools; physical (Time Up and Go Test (TUGT) and Modified Barthel Index- MBI), mental (ECAQ), dental (Dental Health Camp), nutrition (BMI) and health promotion activities. **RESULTS:** There are 35 elderly registered under the KWE. Age ranges from 60 to 85 years old. Majority were female (70%) and Malay (75%). Each component had different numbers of participation. The TUGT which assessed balance showed 96.4% achieved more than 20 seconds with only 1 with normal result of <10 seconds. All 23 whom performed ADL test, scored normal for the MBI with >95 marks. 21 tested cognitively via ECAQ scored normal marks 7/10. Eleven elderly attended dental health camp with seven screened and four for dentures. 60.6% with BMI more than 25 were detected and referred. CONCLUSION: Challenges lies on recruitment to join KWE and difficulty in ensuring regular participation for all 5 components. Thus, affecting commencement of intervention leading to poor progress evaluation. Poor accessibility for the elderly to join KWE can be improved via KOSPEN and engaging Health Clinics 'Panel Penasihat' to bridge the gap. Financial support allows staffs to be trained and ensures sustainability of this program.

KEYWORDS: Elderly, structured, module, Kelab Warga Emas, Healthy aging.