

# **Addressing Nutrition Issues Through Dietary Guidelines: Identifying the Target Audience and Ensuring the Reach of the Dietary Guidelines**

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## **Introduction**

Rapid advancements in the socioeconomic situation in many countries in the Asian region have resulted in significant changes in the lifestyles of communities, including food habits and food-purchasing and food-consumption patterns; e.g., increased consumption of fats, oils, and refined carbohydrates and decreased intake of complex carbohydrates. Changes in meal patterns are also evident: more families eat out; skip meals, especially breakfast; and rely too much on fast food, convenience food, and processed food. Some mistakenly believe that taking vitamin and mineral supplements can make up for the lack of nutrients in their daily diets. All these changes have resulted in a definite alteration in the food and nutrition issues facing the communities in these countries over the past two decades, with an increase in diet-related chronic diseases in the region. At the same time, many countries also must tackle the problem of nutrient deficiencies.

Various intervention programs have been undertaken by the authorities to tackle these nutritional problems. The new dimensions in the nutrition situation pose great challenges to the nutritionists and other health workers in these countries. It is necessary for these societies in transition to redefine their priorities in policies and programs to more effectively tackle the food and nutrition issues facing their communities. This paper lends support to the development and propagation of dietary guidelines for those communities. It deals with two aspects of this promotion—namely, that of identifying the target audience and ensuring the reach of the guidelines. It does not provide answers to these aspects but rather asks several questions that perhaps can be considered by the workshop to improve implementation of national dietary guidelines.

## **Dietary Guidelines to Promote Healthy Eating**

In cognizance of the increasing incidence of noncommunicable diseases, the health authorities in many countries have launched comprehensive campaigns for the promotion of healthy lifestyles among the population. It is important that these activities and programs continue to be given focus and the required impetus to achieve the desired results. Promotion of a healthy lifestyle certainly includes promoting healthy eating habits and maintaining a desirable dietary pattern. It is clear that educating the community about nutrition is the long-term solution to the nutritional problems encountered by them. All efforts should therefore be made toward inculcating a culture of healthy eating among the population.

It is important to provide clear guidelines on healthy eating. Consumers are now surrounded by a great deal of nutrition information—in magazines, books, and newspapers and on television. These may serve as potential and valuable means of nutrition education, but they may also confuse, misguide, and misinform consumers. Sometimes these messages are promoted by certain quarters that use sensational interpretation, shock tactics, and descriptions of miracle cures and revolutionary “breakthroughs.” The net effect of exposure to these various information sources may be an irrational view of nutrition in relation to health. A misunderstanding of the role of diet in health maintenance may result, and, in consequence, a food fad may arise. This situation has caused considerable concern to health professionals. It is thus the duty of the nutritionist to play the role of providing correct nutrition information to the public.

Many countries have established dietary guidelines for the use of the community. Some of these may

be termed as “national” guidelines, whereas others have been developed by specific groups for particular purposes. There are several similarities in all these guidelines, with variations and emphasis on specific topics by different countries. Several of these guidelines will be presented in this meeting.

## **Challenges to Implementation Strategies**

The implementation of healthy-eating dietary guidelines is a challenge to program implementers. Formulating a set of well-defined guidelines is vital, but implementing the guidelines is of paramount importance. The challenge is to convince the community to adopt the proposed dietary guidelines toward a culture of healthy eating. In other words, the challenge is to identify the target audience and ensure that messages reach the intended audience.

## **Identifying the Target Audience**

Many of the guidelines in the developed countries are very much biased toward prevention of diet-related chronic diseases or the so-called “overnutrition” disorders. In many developing countries, where under- and overnutrition coexist, is the approach of such guidelines appropriate? If not, should there be separate dietary guidelines directed at both facets of the problem or could both aspects be addressed in one set of guidelines? Many may support the inclusion of appropriate strategies for nutrient deficiencies as well, whatever approach is taken.

Similarly, in many developing countries, rural communities still form significant proportions of the population, although this situation is fast declining. Thus, guidelines from developed countries may not be appropriate for many countries in the region. Should we take into consideration the differences in the nutrition scene of rural and urban communities in the country? If so, how do we accommodate both scenarios?

Many dietary guidelines are very general and are aimed at the adult population. However, it is particularly important for young children to adopt healthy food habits to start the prevention of chronic diseases as early as possible. Even in developing countries, indications are that the problem of childhood obesity is increasing. Are the current guidelines quite appropriate for this target audience? Should there be separate guidelines or specific reference to other particular groups such as adolescents and the elderly in the guidelines? There is increasing focus on these groups and national health authorities have initiated specific programs for them. The elderly population

in the developing countries is increasing, whereas the nutritional and social problems of adolescents should not be neglected. At the same time, is promotion of breast-feeding adequately covered?

Besides the community-based health clinics, nutrition-promotion activities should also be actively carried out in clinics and hospitals, as they offer appropriate opportunities and an environment for this purpose. A systematic and organized patient education program in the hospital-care setting is essential to promote patient compliance to diet and other health-related recommendations. Guidelines for patient education should be prepared and implementation should be properly organized.

## **Ensuring Reach of the Dietary Guidelines**

Nutrition education activities have been going on for many years in all Asian countries. These programs have contributed to uplifting the health and nutritional status of the communities. However, because the nutrition scene has changed dramatically over the years, nutrition education strategies need to be restructured and targeted to the changed scenario. We really need to reexamine the present nutrition education strategies to determine whether they will be able to reach the target audience to bring about the desired changes. Various aspects need to be examined, including the appropriateness of nutrition education messages, the appropriateness of educational materials for dissemination to the community, and the availability of education approaches and avenues appropriate to specific target groups to all levels of the community.

First, one needs to consider the educational materials. Serious consideration ought to be given to the appropriateness and the availability of educational materials to the public. Pamphlets currently produced for educational activities ought to be examined with regard to their presentation formats. To reach the target groups, nutrition education materials need to compete with a wide variety of attractive pamphlets that are already in the market promoting a host of products and services, including food. It is also important to consider whether the public really understands our nutrition messages. Are we being too technical? Some people will say we are too shallow if we do not provide more technical details.

Similarly, booklets, posters, and other exhibition materials should catch the attention of the public. The use of videotapes for nutrition education should be further exploited. But are the available videos suitable for use? We would like the videos to portray lo-

cal scenarios, featuring local story lines and personnel. They are expensive to produce, but it is certainly worth it.

Are we making these materials available to all of the public? Are we reaching those segments of the community that most need these materials rather than preaching to the already converted? Consideration must be given to avenues for distribution of these materials. Wastage of materials is also a matter of serious concern.

Second, the nutrition-promotion media ought to be seriously reviewed. Radio and television are probably the most popular mass media of the general public. Are we making sufficient use of these channels to reach the target audience? Especially for television, are we broadcasting at the appropriate times to have the most impact? Are we broadcasting enough? Television airtime, especially prime time, is very expensive. The problem is whether we have the budget to air broadcasts every day. Should television stations or the ministry of information sponsor some of these broadcasts? Do we have a systematic and thematic approach to broadcasting over radio and television? Can we also use television to teach nutrition education in schools?

Are we using the print media enough? There are many articles related to nutrition and health in the daily newspapers, including feature articles, news items, and certainly advertisements. The situation is similar in the many magazines now available, including several dedicated to health. Are the feature articles truly educational, or are they advertisements in disguise to promote a certain product or service? These could have a great deal of influence on the consumer, especially with increasing literacy in the country and greater awareness of health.

General medical practitioners are in direct contact with the public, albeit the sick ones. They can be a useful channel for nutrition promotion, reaching all segments and parts of the country. How successfully have they been used for this purpose? How committed they are to nutrition promotion will determine whether they are willing to take part in these activities.

Third, we need to examine the promotion approaches and strategies. People are said to be rather unconcerned with the ill effects of undesirable eating habits. They take lightly the advice to not overeat and to choose a healthy eating pattern. Diabetics and coronary heart disease patients, however, tend to be rather conscientious in following dietary guidelines. It is therefore the preventive aspect that is taken lightly by the public. The challenge is how to deliver the message to the target audience. What are the best approaches to the implementation of these guidelines?

Do we use scare tactics or gentle persuasion? What is it the consumer likes to hear?

It is not impossible to change lifestyle and eating habits, because many societies in Asia have changed or are in the process of changing their food consumption pattern to that of a more "affluent" type. We now know that this pattern is really not desirable and is the contributory factor for the increase in chronic diseases. Why have people changed their eating habits? What is the driving force for this change? What strategies are used to bring about these changes? Can some of these strategies be used to promote healthy eating guidelines? Should the health authorities adopt some of the strategies of the corporate sector?

More innovative strategies are needed to promote healthy eating if we are to be successful in arresting the increase in chronic diseases and eliminating nutrient deficiencies. These strategies will necessarily have to be culturally and group specific. It is necessary to understand the characteristics of the target audience to bring the message across. The behavioral scientists should play an active role in these activities.

## **Conclusions**

It is important to prepare clear guidelines for the promotion of healthy eating among the community. For these guidelines to be acceptable by all relevant authorities, it is important that all relevant parties in the country participate in the development of these guidelines. The implementation of these guidelines is of prime importance. The main concern should be to identify the target audience and find ways to ensure that the messages reach the intended population groups. This is of course easier said than done. It requires a great deal of effort, innovation, resources, and, most importantly, commitment of the implementers. We must continue to find strategies that appeal to the public to bring about the desired effects of the guidelines. We need the resources and the manpower to implement these programs.

The holding of this Workshop is indeed timely and very useful for participants. It provides an opportunity for countries in the region to learn from each other, as we are at different stages of development of national dietary guidelines. The strategies and lessons learned by one country can be useful for another. There is of course no one single "package" that can be adapted for all countries in the region. Each country has to identify its own priority target groups, prepare culturally appropriate educational materials, and formulate appropriate strategies and approaches.

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