

EDITORIAL

Are We Well Fed?

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On 1979 a series of reports on food and nutritional situation in the Arabian Gulf countries were issued by joint efforts between the UNICEF and FAO. These reports concluded that the nutritional status of a high percentage of young children as well as adults in this region is deficient. The prevalence of wasting, stunting and iron deficiency anaemia is similar to many poor developing countries.

These facts have shocked the health authorities in the Gulf. How can the countries with a high per capita income in the world have this high proportion of under nutrition? What is wrong with our diet and food habits? Since 1980 many studies have been carried out in the region focusing on the food habits and some factors associated with nutritional diseases. Although more and more studies are needed, it became evident that the change in our food habits and ignorance are the main factors affecting the nutritional status of the people in the Gulf.

The consumption of traditional foods such as fish, dates, laban (butter milk), fresh vegetables and high fiber breads has gradually decreased. The meal patterns have now become diversified with more intake of canned foods, meat, chicken, eggs, fats and sugars. Fast foods such as beef burgers, potato chips, corn puffs, milk shake, carbonated beverages and many others, are becoming essential food items in Bahraini diets especially among the young generation. This change in food habits combined with lack of awareness and change in life-styles have a great impact on the health status of the community. Infectious diseases were the main health problems. Nowadays heart diseases, diabetes, obesity, dental caries, cancer as well as under nutrition and iron deficiency anaemia are the major public health problems. All these diseases are linked with dietary habits.

We do not have shortage of foods or income like many other developing countries, but the nutrition awareness of both the public and health professionals is very low. This is mainly due to ineffective health education programmes, and inadequate nutritional information in school and university curricula.

Nutrition is never given priority in any health programmes in the country. Emphasis was mostly concentrated on food quality control. It is the opportune time to review our activities in nutrition not only in the health sectors but also in social and educational sectors to overcome both under and over nutrition. Sound and effective health education is urgently needed to increase the health awareness and to correct our food habits. Nutrition should be given a priority in preventive health programme in the country. It has been neglected years ago, but we do not have to continue this negligence any further.

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