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Interesting the Community in Nutrition

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SUMMARY

Many factors other than nutritional considerations affect the individual's choice of food. These influences often are not conducive to good nutrition. All available means should be used to disseminate information on nutrition and to provide guidelines to good eating habits. Every effort should also be made to promote an active interest in nutrition among the Black community.

S. Afr. Med. J., 48, 2515 (1974).

This is a simple and yet difficult subject when you think of the bad eating habits people have adopted these days. I would rather teach people nutrition than venture to interest them in nutrition.

Nutrition is a complex science and expert knowledge is necessary to determine the dietary needs of people and to interest them in carrying out this knowledge. It is a process by which we ingest food and utilise it, and which may be poor or good depending on what we eat and how we eat it.

EATING HABITS

Our eating habits depend more on appetite than the need for nourishment, and our sensations of taste and smell —pleasant or unpleasant—determine appetite. Because of commercialisation, tasty ice-creams, rich cakes and cold drinks are popular, and there is too much eating just to satisfy taste and very little actual nourishment in what we eat.

Appetising dishes make it difficult for a healthy person to limit his intake. Young girls normally like sweet foods, irrespective of their bodily needs. The idle are notoriously addicted to eating as a pastime—in fact they eat anything at any time. Drinking tea, coffee and other beverages does not necessarily depend upon nutritional want. Masticating chewing gum is another of those habits not directed towards nourishment of the body.

The habits of eating polished or refined rice instead of steamed red rice which is so superior in its content of vitamin B complex, eating white bread instead of brown, and the use of white maize instead of yellow, pinpoint the harm our sophisticated society has done to nutrition. To me these are nutritional problems which must be dealt with effectively in the process of trying to interest the community in nutrition.

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We have to determine what is sound and what is unsound, what is speculation and misinformation in respect to the nutritive needs, and the extent to which generalisation can safely be made as to which foods have supplementary values. We also need to indicate the types of combinations of foods which make diets complete from a nutritional point of view.

Balanced Diet

Nearly all foods, considered singly, are deficient in certain indispensable nutrients, and we can only secure a highly satisfactory diet by combining a number of kinds of foods in such proportions that they make good each other's deficiencies and form a balanced diet. Nutritionists and experts have made it easy for us to plan healthy diets by providing seven basic groups from which to draw our daily food.

NUTRITIONAL HEALTH EDUCATION PROGRAMME

As much as we all are busy organising Family Planning Programmes, we are trying to direct the community's attention to what affects their health—nutrition deficiencies. Basically, all ailments or disease can be traced back to lack of nutrition at some stage. Only a healthy body, one that is well nourished, can absorb the stresses and shocks of this life—nutritional health education is therefore a necessity if we are to have resistance against diseases. A crash programme to interest the community in nutrition is necessary.

Already agencies like the Milk Board, Egg Board and Maize Board have teams of trained personnel who encourage people to use their products. Unfortunately, this is done from a commercial angle. Kupugani and the African Children's Feeding Scheme are fighting in Black areas to sustain the poorer families by supplying powdered milk and bread at very low cost.

Formal Education

We have nutrition committees and clubs whose main work is to arrange seminars, health days and short courses on nutrition in order to stimulate interest in eating the right food. Competitions are held to make everybody nutrition-conscious. Schools, parent-teachers' associations, churches and women's auxilliaries (African Housewives League, YMCA and NCAW) are given talks on nutrition. School garden produce is sold at very low cost to parents. N 120

Informal Education

Through mass media, communication pamphlets are distributed to schools, film shows are arranged for schoolchildren and eye-catching posters on nutrition are also used in schools. We also hope to use the Press to disseminate education on nutrition. The SABC (Radio Bantu Service) prepares talks on nutrition. Any commercial over-emphasis on certain commodities is avoided—the idea is to interest every person in the proper selection of foods and in a balanced diet.

Teaching Personnel

We need people for this kind of work. To be effective we need to introduce or encourage day-by-day on-the-job teaching programmes. Teachers, social workers, health inspectors and nurses should all help to educate the community. We live in such a highly industrialised country that some of our big commercial concerns should be in a position to employ full-time health educators to deal with this aspect of health education. The modern trend of preventive medicine places the responsibility on every home and every business concern. Nutrition can prevent anaemia, beriberi, kwashiorkor and pellagra. We must use any work situation as a means of passing on and spreading knowledge on nutrition. The patient-care situation in hospitals should also be used to educate patients as to good eating habits, no matter how simple the meal may be. The emphasis should be on wholesome, nourishing meals.

Projects

Special projects or schemes are envisaged to keep the community informed about nutritional needs. Special

tribute has already been paid to the African Children's Feeding Scheme, which is heavily engaged in feeding thousands of Black school-going children with a nourishing meal of a slice of brown bread and peanut butter and milk.

At national and local levels, the following services could be utilised to reach as many people as possible:

(a) mobile radio service;

(b) nutrition mobile units to display different simple diets and distribute relevant printed material;

(c) special diet cards in hospital, to be attached to the case history of every patient, indicating the type of diet the patient has at home and the diet suggested by the hospital nutritionist;

(d) nutrition centres or food clinics in every locality, manned by consultants who are trained nutritionists and dietiticians. The envisaged centres could work hand-inhand with clinics and hospitals by continuing to feed, at very low cost, those outpatients on continued treatment.

CONCLUSION

I have tried to give in very broad outline what I think are ways and means of interesting the community in nutrition. I have advisedly decided to overlook the economic situation of the different sectors of the community. Working within one's means and eating a simple wellbalanced meal could keep disease from everybody's door. I have merely scratched the surface of this vital topic, but if I succeed in setting your mind thinking along these lines, and if you have some better suggestions to make on how to interest the community in nutrition, then something has definitely been achieved.

2516