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ORIGINAL ARTICLE

Understanding the importance of Nutrition Tagsbetween Health Related & Non-Health Related Professionals

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ABSTRACT

Objectives: To assess and compare understanding of nutritional tagsbetweenhealth related and non-health related professionals.

Study design: cross sectional study

Place of study: Rana LiaquatAli Khan College 1-10-2019 to 1-3-2020

Methodology: In this research questionnaire was used for data collection from 400 respondents by simple random sampling technique. Subjects involved in the study were health related and non-health related professionals, age ≥18, both male and female, middle and high income individuals, and healthy individuals and individuals with chronic disease. For assessing understanding of nutritional tags.Data was entered in SPSS version 20 and analyzed through using chi square test for independences.

Results: Results (p value >0.05) shows that insignificant variance in understanding of nutritional tags among heath related and non-health related professionals.

Conclusion: The research concluded that there is difference between understanding of nutritional labels in related and non-health related professionals. Further research is needed for better outcomes.

Key: noncommunicable diseases (NCDs), atherosclerosis, ischemic heart disease (IHD), front-of-pack nutrition tagging (FOPL). Cerebrovascular disease (CVD).

INTRODUCTION

Nutritional labeling is used to provide nutritional material information to buyers to assess the quality of sealed food products and encourage healthy dietary habits in order to reduce the risk factors of non-communicable ailments. Nutritional labeling differ from country to country. Some people like to use traffic light as symbol denoting nutritional ingredients like green, orange, red to deliver information about the quality & pertinence of food.[1] Nutritional labeling is basically a printed or graphic material on food containers or article when it is apprehended for sale. These labels were designed for information of customers and support them in choosing better varieties of food.[2]A worldwide epidemic of nutritional regime associated chronic illness has encouraged researches using food as a mandatory part of patient management. One out of five demises globally depends upon inappropriate dietary habits and proper healthy diet can avert, manage & reverse the progress of ailment.[3]Chief role of these labels are to give information regarding the constituents of product, their advantages & disadvantages in order to promote trade. It also helps healthcare experts to guide their patients about taking healthy food products. Malnutrition raises the ailment liability in 3rd world states of about 80% so labels on nutrition articles helps people to know about how to store and handle the product.it also tells the consumers about allergens present in it.[4]

Nutritional deficiencies causes various ailments like immunodeficiency, weakness, and multiple noncommunicable diseases (NCDs) e.g atherosclerosis, ischemic heart disease (IHD), and cerebrovascular disease (CVD). Unhygienic food raises the risk of above mentioned illnesses & mortality. Older females have more nutrition-related knowledge (NRK) which enhance their ability to understand what to eat for their better health status. This shows that education and interventional plans are nessarssary to promote wellbeing of senior citizens.[5]

Nutritional information are usually written on back of foodstuff packaging in the form of table or grid and a label is also present on front-of-pack called (FOP) which is based on GDA (guideline daily amount).[6]It is responsibility of young people too, to read labels earlier to purchase it. Social media also play a key role & have a great influence on behaviors and to select better nutritional products.[7]Balanced nutritional diet comprises of adequate amount of fats, proteins, vitamins, carbohydrates and minerals. Absence or inadequate amount of these nutrients causes physical inactivity, impaired health leads to occurrence of non-communicable ailments like coronary heart illness, diabetes mellitus, osteomalacia & various cancers. To cope up these problems people are using dietary supplement now a days for their better health.[8]Dietary supplements enhances the mental as well as physical activities, relieve nutritional insufficiencies and boost up immunity.[9]

Worldwide, healthcare specialists & paramedics contribute in reassuring public health guidelines during routine patient checkup e.g anti-smoking or anti-alcohol programs and inform patients about healthy living style by knowledge, attitudes and use of food labels. [10]Unhealthy regimes that encourage food with high amount of salt, sugar & fat are one of the leading cause of demise and disability internationally, because they are related to non-communicable diseases. Therefore to decrease NCD frequency & raise the nutritive profile of foodstuff & obligatory nutrition labels on the back of diet container is recommended by World Health Organization along with front-of-pack nutrition tagging (FOPL).[11,12,13]Synthetic sweeteners are substitutes of sugar & provides energy & sweetness to diet. Thus decreases risk of obesity and diabetes but causes bulkiness & insulin dependent diabetes, so food labels are mandatory for purchasers knowledge and trust in product.[14]Social media also has potential to spread threats against public health issues.[15]Inappropriate drug prescription with inappropriate consumption of antimicrobial medicines increases drug resistance.[16,17] These labels fascinate customers' attention in marketing areas & tells about safety, alternatives& information of diet.[18,19] It helps customers to pick healthy nutritional options.[20] Nowadays people wants awareness about halal food because they believe that consuming halal food is good for our health & play a key role in health promotion.[21,22]

Proper usage of nutrition labels aids buyers in purchasing healthy food which is favorable for our health & keeps away from chronic illnesses.[23] WHO recommended FOPL to prevent obesity and non-communicable illnesses like cardiovascular ailment, diabetes & also provide sufficient knowledge for elder customers.[24,25]

METHODOLOGY

This study is a project of 8 girls of BS students of RLAK College. Total participants taken were 400 health related and non-health related professional of 18 to 55 years age. Open and close ended questions was applied using an interactive process to make quantitative and qualitative data about awareness, usage, perceptions and labeling information on foodstuffs.Level of awareness on food labeling was attained by questioning 22 nutrition related questions supposed to be found on pre-packaged foods. The questionnaire also collected information on demographic characteristics. Questionnaire was filled from health related and non-health related professionals, working males and females, healthy individuals and individuals with chronic disease.Data collected by simple random sampling & questionnaire was filled by investigator in malls, hospitals, banks. SPSS statistics 20.0 was used to seegender, learning and earnings for quantitative variables.Hypothesis testing conducted using chi square test.

RESULTS

Demographic Characteristics: Respondents were predominantly female, graduate 18-35 years of age, healthy and married. The income of the majority of sample was >50,000. 51% of the participants belongs to a non-health related profession, and (49%) to a health related profession as shown in Table 1. The percentage of health related and non-health related professionals answering yes was (76%), while (24%) respondents answered no. When we asked 'Why do you read food labels?' the reasons was health concerns (47%) & to select best product (26%), (Figure 1.1). When we asked 'Why don't you read food labels?' the reasons were lack of time (42%) or lack of interest (33%) (Figure 1.2). 46% showed that they are moderately informed about food and nutrition labels, while 9% showed that they are unaware of food and nutrition labels (Figure 1.3).

Table-1: Demographic Features (n=400)

Characteristics	Frequency (n)	Percentages (%)
Gender		
Male	147	37%
Female	253	63%
Age		
18-35	257	64%
35-55	143	36%
Income level		
>20,000	162	40%
>50,000	238	60%
Marital status		
Single	180	45%
Married	212	53%
Divorced	6	1.5%
Widowed	2	0.5%
Educational Level		
Matriculation	6	1.5%
Intermediate	45	11%
Graduate	226	56.5%
Postgraduate	123	31%
Profession		
Health Related	194	49%
Non Health related	206	51%
Health status		
Healthy individuals	207	52%
Individuals with chronic diseases	193	48%

With respect to the perceived trustworthiness of various claims on food labels, 23% of the health related and non-health related professionals perceived that claims are true, while majority of them perceived that claims are just an advertising tool and in opinion of some people claims can be relied upon if stamped by government as approved (Figure 1.4) 42% always consult food and nutrition labels when they follow a special diet for medical reasons, while 53% answered that they always consult food and nutrition labels whenever they buy a new food product. 30% of health related professionals and 23% of non-health related professionals answered that they never consult nutrition claims made on the front of package specifically claim the product to be low in fat (Table 1.5).

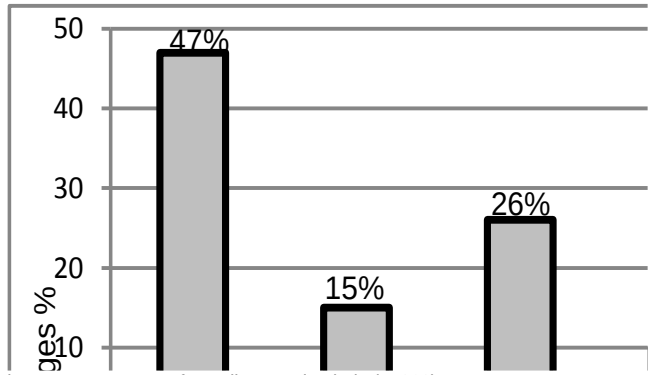

Figure 1.1: Reasons of Reading Food Labels (n=303)

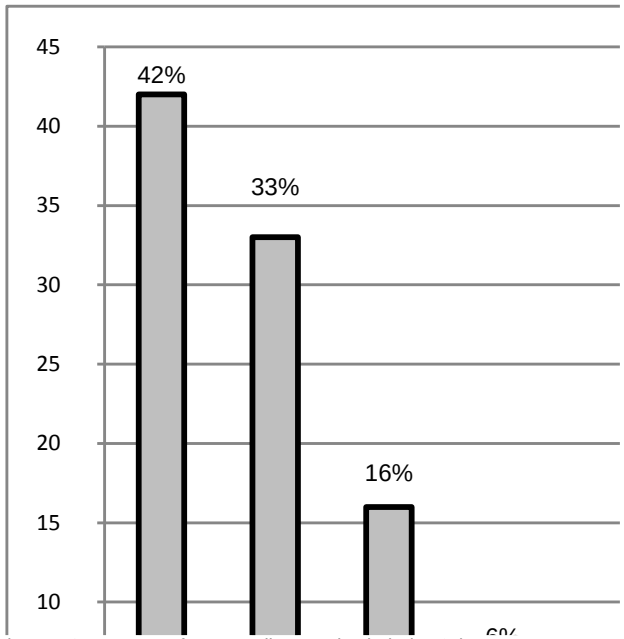

Figure 1.2: Reasons of Not Reading Food Labels (n= 97)

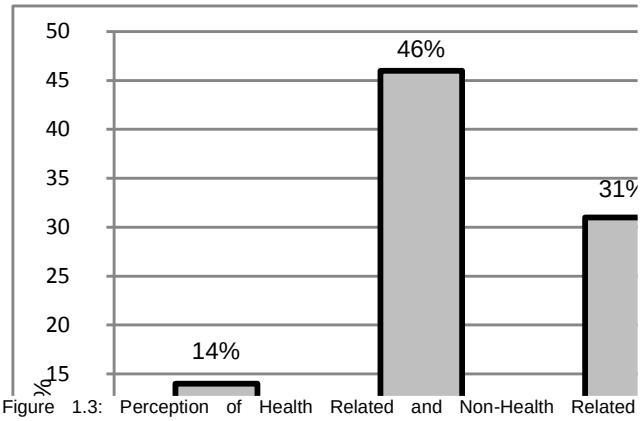

Figure 1.3: Perception of Health Related and Non-Health Related Professionals about their nutritional Label Information. (n=400)

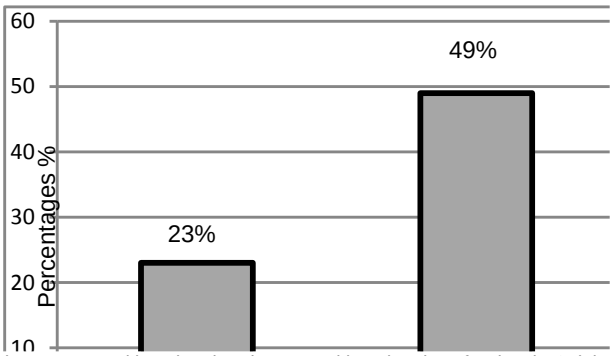

Figure 1.4: Health Related and Non-Health Related Professionals Opinions about Nutrient Content Claims (n=400)

Table 1.5 Different Situations of InterpretationDietary Labels (n=400)

Situations	Incidence of Interpretation dietary Labels			
	Profession	Always	Sometimes	Never
At Home	Health related professionals	31%	45%	24%
	Non-health related professionals	35%	46%	16%
Follow A Special Diet	Health related professionals	42%	30%	28%
	Non-health related professionals	46%	34%	20%
When Confirming A Low Fat Claim On Label	Health related professionals	28%	42%	30%
	Non-health related professionals	33%	44%	23%
Buying A New Food Product	Health related professionals	39%	34%	27%
	Non-health related professionals	53%	25%	22%
While Doing Food Shopping	Health related professionals	23%	57%	20%
	Non-health related professionals	35%	47%	18%

DISCUSSION

Previous researches suggest that behaviors are subjectivetoseveral demographic factors like age, sex, house status, race, education and occupation.[1,7,8,9,20]Previous researches also shows that contributorsrestrictthemselves on low fat dietfor better health.[8]On the contrary, small font size, terminology and incapability to comprehend nutritional labels are basic problems of respondents.[12]Results of previous study also revealed that out of the respondents who readdietary label before buying,most of them said that they completely understood all they read however few of them didn't comprehend what they read due to terminologies used in it.[21]Our results are same like previous studies whoreveals that confusion and skepticism about the credibility and scientific truthfulness of health-related claims on food labels still exist, despite food regulations.[19]Result of previous research indicates that, most of the customersoccasionally see label information before buying the product.[24] Another study shows that most people use label information when they are shopping.[6]

CONCLUSION

The research determined that understanding of nutritional labels is varies between health related and non-health related professionals. Further research is needed for better outcomes.

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