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Adherence to healthy eating amongst adolescents living in Singapore and Malaysia

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As a developed country, Singapore has easy access to foods and ‘eating out of home’ is becoming more prevalent but not necessarily healthier. Similarly, Malaysia, and despite not that developed is also not immune to the influence of the obesogenic environment which may induce poor food choices, e.g. excessive intake of sweet drinks and fast food⁽¹⁾. There are limited studies in contrasting dietary habits of young people in Singapore and Malaysia⁽²⁾. The aim of the present study is to contrast Singaporean and Malaysian adolescents’ adherence to healthy eating habits via a survey using a questionnaire adapted from the KIDMED Index⁽³⁾ with added food items reflecting the South-East Asia food context.

The sample included 254 adolescents aged 12 to 15 years from Singaporean (n = 87, 69 % females) and Malaysian schools (n = 167, 74 % females). Surprisingly, adolescents from Singapore (*Mean Rank* = 114.83) had a lower Healthy Eating Index ($Z = -1.996; p = .046$) than from Malaysia (*Mean Rank* = 134.10) suggesting lower adherence to healthy eating. This is confirmed when looking at the distribution according to diet quality: There were more Malaysian than Singaporean adolescents placed in the categories *Diet to Improve* and *Good diet* ($\chi^2_{(2)} = 6.378, p < .041$, [Figure 1](#)).

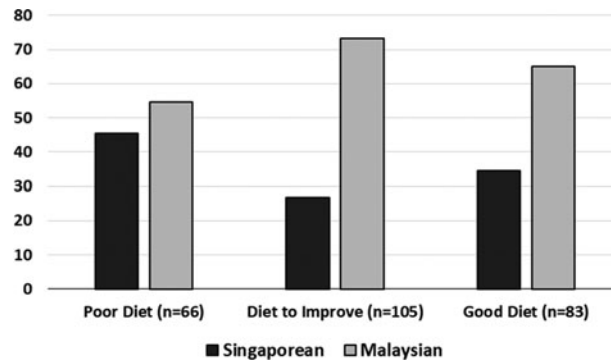


Fig. 1. % of Singaporean and Malaysian adolescents across the Healthy Eating Index categories.

Indeed, more Malaysians reported eating a *salad or cooked vegetables once a day, lentils or peas or beans more than once a week* than Singaporeans did ($p < .05$). However, more Malaysians stated consuming *almost every day* sweetened dairy based products, such as *flavoured yoghurt or coloured milk* ($p < .05$). In contrast, Singaporeans drank *sweet or fizzy drinks almost every day* ($p < .05$).

Considering ethnicity, comparisons were made between the main ethnicity for both countries, the Chinese. Similar patterns as previously stated were observed with Chinese-Malays having a better diet than the Chinese-Singaporean ($p < .05$). To add, more Chinese-Singaporeans eat *fast food* than the Chinese-Malays ($p < .05$). In contrast, more Chinese-Malays reported to *have breakfast everyday* ($p < .05$).

When contrasting the same gender between both countries there were more Malaysian than Singaporean girls that consumed more *salad/vegetables and pulses* ($p < .05$). Regarding boys, there were more Singaporeans than Malays who consumed *cakes or pastries for breakfast*. In the Singaporean sample there were more boys than girls who *drank fizzy drinks* ($p < .05$). In Malaysia, there were more girls than boys that *consumed salad/vegetables* ($p < .05$).

These results should be taken with restraint, nevertheless justify further support of current health promotion strategies in place in Singapore and Malaysia aiming to improve the diet quality of young people.

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2. Lew K & Barlow PJ (2005) *Singapore Medical Journal* 46(6), 282.
3. Serra-Majem L, Ribas L, Ngo J *et al.* (2004) *Public Health Nutr* 7, 931–935.