



# HOW TO USE THIS BOOK

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At all times remember that this book reports both experience and findings. It is meant to share this experience and invited critiques of it with those who have similar interests and investigatory needs. How you use this book depends on your purpose, which might be one of the following:

## **3.1 OPTION 1: TO FIND OUT ABOUT THE FOOD INTAKE AND HEALTH PATTERNS OF VARIOUS ELDERLY COMMUNITIES**

1. Scan the index to see what communities have been studied in the IUNS (International Union of Nutritional Sciences) project (Sections 2 and 3), the SENECA (Survey in Europe on Nutrition and the Elderly, a Concerted Action), Adelaide and New Zealand (the Caroline Horwath studies), and the Northern Chinese (from the National Institute of Preventive Medicine and Nutrition) studies (Section 4). Further examples, and critiques, from the developing and newly industrialised world are provided in Section 5. Select one of your choice.
2. Read about the ecological background to the community in Chapter 4, the methodological variants in Chapter 5, the demography in Chapter 6, the health status in Chapter 7, the food beliefs, practices and preparation, appetite and eating in Chapters 8, 9 and 10; food and nutrient intake in Chapters 11 and 12; and a number of other variables from Chapters 13 to 18.
3. The integrated data sets for each community are provided in the appendices. So also are the core instruments, namely RAP (Rapid Assessment Procedures) and questionnaire. The systemic questionnaires for each study have not been provided, but are on record with the investigators, and will be progressively published in their own right.
4. Read the critiques of this kind of enquiry in Section 5 (26: The nature of cross-cultural food and health relationships - Trichopoulos et al.; 27: Sociocultural considerations in data collection and interpretation - E Messer; 28: Health Assessment of the Aged - M Wahlqvist; 29: Assessing Food and Health Relationships - N Solomons; 30: Pitfalls for

the investigator - R Gross). You will find, for example, that a nutritional anthropologist like Ellen Messer, finds the present studies lack sufficient and/ or explicit enquiry about "food security". In this event, more attention may need to be directed to the appendices, or the limitations borne in mind, or further work planned.

5. The information provided about specific communities is at present principally descriptive and has only the beginnings of opportunities to look at intra-community, let alone inter-community, food-health relationships.

### **3.2 OPTION 2: TO LEARN WHAT DIFFERENCES MIGHT BE EXPECTED BETWEEN COMMUNITIES OF ELDERLY PEOPLE IN TERMS OF THEIR FOOD INTAKE AND HEALTH PROFILES**

1. Read the background methods and demography (Chapters 4, 5 and 6) for the communities of interest.
2. Then proceed to the tabulated, comparisons of the variables in question.
3. Read the chapters dealing with the limitations of such data (25, 27-30, 31 and 32).

### **3.3 OPTION 3: TO UNDERTAKE A STUDY OF FOOD-HEALTH RELATIONSHIPS IN YOUR OWN COMMUNITY BY REFERENCE TO METHODS, LIMITATIONS AND FINDINGS IN THE PRESENT WORK**

1. Study the primary methodology
  - (a) socio-anthropological (RAP)
  - (b) systematic for food and health in the appendix.
2. Take a community, in type nearest to your own (and 1 or 2 others), for close reading.
3. Read the critiques in Sections 6, 7 and 8.
4. Define your goals and endpoints.
5. Make the appropriate methodological adjustments before proceeding to study your own community.

