

Confronting the health hazards of industrialization in Malaysia

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The authors outline the steps being taken in Malaysia aimed at persuading people to avoid the unhealthy lifestyles commonly associated with socioeconomic development and increased affluence, and to adopt healthy dietary and other habits.

Malaysia has implemented a range of programmes for the control and prevention of disease, and consequently the incidences of poliomyelitis, tuberculosis, diphtheria and other preventable diseases have declined markedly during the past 30 years, while the infant mortality rate has fallen to 13.1 per 1000 live births. In 1960 the life expectancies at birth for males and females were 54 and 58 years respectively; by 1990 the corresponding figures were 69 and 73 years.

However, as elsewhere, industrialization and economic progress have been accompanied by changes in people's lifestyles. Eating habits have become less regular and too much reliance is now placed on foods rich in calories, fats, cholesterol, salt and sugar. Epidemiological studies have established a link between such diets and the risk of degenerative chronic disease in middle and later life, particularly cardiovascular disease and certain types of cancer. Furthermore, physical exertion has diminished and the consumption of tobacco and alcohol has increased.

The incidences of diet-related noncommunicable diseases are rising; thus between 1979

and 1988 the mortality rate attributable to cardiovascular diseases increased from 21.6 to 37.0 per 100 000 population, while hospital admissions for these diseases rose by 315%. The risk factors for cardiovascular diseases in Malaysia include smoking, obesity, hypertension, diabetes and hypercholesterolaemia (1). During the past 20 years the mortality rate associated with malignant neoplasms has increased from approximately 15 to almost 20 per 100 000, and the incidence of diabetes mellitus has doubled.

The so-called lifestyle diseases affect not only individuals but also society as a whole, and it is therefore important that the public at large be informed of the need to adopt and maintain a healthy lifestyle. This does not just mean being physically fit; it is necessary to have the ability to recognize and choose suitable foods, to maintain a proper body weight, to avoid smoking and the consumption of alcohol, and to take moderate amounts of exercise on a regular basis. A healthy lifestyle leads to improved physical and mental well-being and helps people to cope with the stressful circumstances of the modern world.

Healthy lifestyle campaign

In 1991 a nationwide healthy lifestyle campaign, *Choose health*, was launched by the Ministry of Health to confront cardiovascular

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diseases, AIDS, sexually transmitted diseases, cancer, diabetes and childhood diseases and to promote food safety (2). The broad approach was as follows:

- to raise awareness of the dangers of lifestyle diseases;
- to provide education on preventive measures;
- to promote healthy lifestyles.

In the interests of systematically disseminating information and bringing about a proper understanding of the issues by the general public, the campaign is conducted at the national, state and district levels. The foci of attention were coronary heart disease in 1991, AIDS and sexually transmitted diseases in 1992, food hygiene in 1993, and child health in 1994. Special attention will be given to cancer in 1995 and to diabetes in 1996. Each theme is to be sustained for six years.

In order to back up the traditional approaches to health education, techniques used to promote sales of commercial products through the mass media have been adapted for the rapid creation of awareness about health matters. The activities undertaken include:

- an initial press conference with a slogan and logo, aimed at creating a high level of awareness and interest;

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- a media blitz involving press releases, advertisements, television and radio commercials, interviews and talk shows;

- annual thematic campaigns, as outlined above;
- a thematic mobile exhibition promoted through the mass media, starting in the capital and transferring to other locations, with associated activities and special events;
- special events to stimulate interest in healthy lifestyles and to give the possibility of trying or adopting them;
- community participation projects;
- the production and distribution of printed materials and associated items, aimed at constantly bringing the matters in question before the public and providing a consistent approach to the campaign.

In 1992 an independent firm of consultants evaluated the effectiveness of the *Choose health* campaign, with particular reference to the 1991 focus on coronary heart disease. A commendable level of awareness and a considerable attitudinal impact were reported. The media campaigns, including the mobile exhibition, were useful, interesting, important and relevant according to 80% or more of the adults interviewed.

In a rapidly developing society, attention to lifestyle is essential if the physical and mental well-being of the people is to be protected. The healthy lifestyle campaign of Malaysia's Ministry of Health places the country in the vanguard of nations tackling noncommunicable diseases associated with industrialization and increased affluence. ■

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Principles of urban development

- *Town planning, agriculture, and other human interventions should aim as far as possible at working with the natural geographical and biological systems rather than imposing themselves on them. Working with the natural characteristics of an environment has advantages as regards drainage and water supply, ventilation, insulation, indoor climates, and microclimates. It is also desirable from the aesthetic standpoint.*
- *Diversity and variety should be aimed at in the physical, social, and economic structuring of communities. Land use should be mixed where this does not create hazards. Monolithic housing estates should be a thing of the past, and increasing integration of work, residence, and leisure facilities should reduce the volume of traffic and the danger and pollution associated with it.*
- *Artificially created systems should be as closed as possible. The application of this principle in environmental management would mean recycling human and solid wastes locally wherever possible and making increased use of renewable sources of water, energy, and raw materials.*
- *There should be an optimal balance between population and resources. Urban and population change needs to be related to the fragile state of natural systems and the environments that support them.*
- *The urban health crisis. Strategies for health for all in the face of rapid urbanization*. Geneva, World Health Organization, 1993: p. 29.