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THE FOOD TRIAD: AN APPROACH TO EATING

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INTRODUCTION

Food and nutrition have been fashionable topics in the South Pacific for sometimes. These have been intimately linked and discussed as inseparable entities over and over again, often ending with a statement of the health implications of poor nutrition rather than of food.[1] The major assumption being that the sole contribution of food to a society has been its nutritional values. The latter being the central objective of food. This assumption has formed the basis of nutrition and health programmes to counter malnutrition and non-communicable diseases in the South Pacific. However, much of these efforts have been short-lived and largely unsuccessful.

The ineffectiveness of the traditional approach to food and health necessitates the re-examination of its fundamental premise. An approach focusing on food and its utilization, and treating nutrition as the least important role for societies' food supply, is a suggested alternative. After all, the contribution of food to nutrition begins only at the start of digestion, whereas its nature and arrival at this point have been determined by factors independent of its subsequent nutritional or health values. These factors form a complex web of influences on food acting internationally, nationally and within the family.[2] These influences fall within the realms of such disciplines as economics, sociology, agronomics, homescience, management, communication, and politics. Therefore nutrition and health are the least important factors affecting food and its utilization.

The basic questions of the suggested alternative approach should be: What is food? Is there food? and How much for food? That is, food must be acceptable, available and affordable for consumption before its nutritional value is significant. There is a dynamic relationship between this triad of questions about food: acceptability (choices), availability, and affordability (cost). The product of the interactions of this triad is the societies' definition of food and its use.

The Nutritional Premises

There has been three underlying premises that have dominated food and nutrition education in the South Pacific. These are as follows:

1. Pacific islanders' genetic inferiority to cope with modern food.
2. the western food concepts are synonymous with those of Pacific society.
3. the sole function of food is nutrition.

The thrifty gene hypothesis suggests a genetic basis for the Pacific islanders' predisposition to maladies from modern foods.[3] The implication being that the Pacific islanders are genetically primitive people destined to live a savage's life eating native foods. Therefore the savages must be coerced not to eat the food of genetically superior consumers. This have basically boosted the status of imported, modern foods at the expense of what the Pacific can easily produce. An alternative hypothesis stated that habital excessive food intake is the root of the problem.[4] This habit was necessary to obtain essential nutrients from the quantatively and qualitatively variable food supply of the Pacific islands. The latter hypothesis implicitly states that Pacific islanders can learn to live within any food system if they are allowed to learn. This will involve time to adjust food habits, non-interference from external food forces (e.g. ingenius pressure marketing techniques of tin-fish and fatty mutton producers), and availability of good quality food people can afford.

To date, the concept of food and meals seemed to have been taken for granted as synomymous among Pacific islands and with those countries of the expatriate nutritionists who dominate the food policies in the Pacific. This have been found to be erroneous.[5] For example, food in Fiji and Tonga are used specifically for root crops. Accompaniment of the root crops during a meal are referred to as i coi or kiki, respectively (e.g. meat or leafy vegetables). If the latter are eaten alone than they are

not regarded as meals. Furthermore fruits are not considered meal foods but rather for snacks. The fruits may be cooked and eaten as kiki, "dessert", or much later after the main meal as snack. These brief examples indicate a fundamental difference between western food and meal concepts than those of the Pacific. Therefore the current emphasis on nutrient content of food, the three food groups (a classification according to nutritional functions), the three meals a day, and eating for nutrition are in appropriate concepts.

In the Pacific food is an integral part of social interaction In fact any form of social event without food consumption, exchange, and/or presentation lacks status and credibility. The family meal is a medium for social interaction and familial exchange not merely a loading of nutrients. It is a social event where relationships are defined and enchanced through seating, portioning of food and preparations. The families weekly food consumption pattern reflect the relative importances of the days of the week, the best food being reserved for Sunday. Over the year the best foods are consumed during regular feasts, these being important times for display of status and renewal of kinship ties. With such cycles of food use the nutrient intake planned for three meals on daily basis becomes highly inappropriate. From a health standpoint there is no evidence that adequate nutrients intake distributred over a weekly, monthly or yearly period, rather than on daily basis, are disadvantageous. These therefore suggests that food education should address food in the context of society rather than the current nebulous approach.

Food Utilization

The utilization of food follow the different systems operating within a society to meet physical and social needs. The systems are universal and are concerned with social, economic, political, and religious matters.[6] Thus food contribute to social needs as well as the basic need for nourishment. If the social use of food contribute to a more cohesive group, then health values follows without nutrition being an intermediary.[7,8,9]

Food is primarily for eating not nutrition. The processes around eating have been uniquely developed by every society as a culture. Nutrition might have been the underlying reason but certainly not the dominant and tangible factor determining the way society utilizes its food. At societal level,

> "nutrition is too remote from the ordinary person. It smacks too much of chemistry, physiology, and energy balances. Food which is first essential to adequate nutrition, is also something very real and tangible"[10]

Therefore food must be brought in from the cold and take nutrition to the laboratory and academe.

In the social system, food has been used for many purposes. It is used as an agent for socialization e.g. the use of food items for reward, or deprivation for punishment, among children. The imported practice of the cocktail party and snacks have provided the medium for social interaction at different levels of society in all of the Pacific countries. Traditional functions also prevail e.g. reguregu in Fiji. The types of food available for consumption in social functions reflect social status, ethnicity, education, and wealth of the host and guests. Other parameters that will be apparent from the food and its presentation include the occasion,

location, origin, and even the time of day.

The utilization of food in the economic system is easily perceptible. It is being used in exchanges with other commodities e.g. the trading of inland and coastal tribes of Papua New Guinea. Food, processed or raw, is a tradeable commodity for accumulation and demonstration of wealth as well as proving a livelihood for many people through employment. The traditional South Pacific societies are using food to settle disputes and appease the insulted. Food, in this case, is used in the political system as a means to reach group decisions. The modern day food assistance programmes for developing countries have a hidden agenda of spreading imperialism and creating markets for the donors; a thoroughly transnational economic and political use of food. In the religious system, food are used for sacrifice either directly as the proverbial lamb or indirectly through contributions to the religious organisations and charities. Medically, the use or misuse of food have been implicated in both health and disease in traditional and modern Pacific societies.[4,11] All these uses of food overshadow the frequently expressed nutritional function.

The multiplicity of the function society relegate to food have created identities and characters for individual items or food groups. Some have become rich, poor, breakfast, dinner, classy, national, ethnic, or animal foods. Each food category dictate the social dimension in which it must be used. The food characteristics and categories are inherently determined by society in relation to the acceptability, availability, cost, and the designated use. Therefore the food triad is of paramount importance in health, independent of nutritional value.

Acceptability and Choice

The definition of food is culturally determined, being largely dependent on what a person learnt to be food. The degree of acceptability of a food item (choice) are determined by the systems within the society. For example members of some religion do not eat meat or pork, which are delicacies for others. These food choices, if

maintained for long enough, will become food habits. The continuance of a food habit is largely influenced by availability and cost (affordability). Other contributing factors include method of preparation, status of the food item, the age and health of the consumers, and the physical characteristics of the environment.

If habitual foods are available, people will obtain these, irrespective of costs.[2] For example, Pacific Island food items in New Zealand are relatively more expensive but increased demands by migrants from the region have increased exports from the Pacific countries, providing an invaluable market for local growers. When only new food items are present, food preparations have tended to be how the usual has been prepared e.g. the use of flour for to'-okutu (Tongan cake) during local food shortages [12] and takihi among Niueans in New Zealand.[13]

Food acceptability and choices independently affect the supply and demand equilibrium. When food choices are made, a demand for the preferred items will be created. If the supply are not increased to meet the demand, then prices increase. Therefore production or importation will be encouraged. For the Pacific countries the response have been to import rather than concentrate on sharing the food already available locally. The imported food items available have adversely affected health.[4,11] Therefore the encouragement of importation will perpetuate its consumption and ultimately lowering Pacific health. These unhealthy changes have all ready threaten the happiness of Pacific island populations.[4,11] The increased dependence[15] on imported food reinforced by the prestige of all that is Western and the illusion of inferiority of all that is Pacific. The rhetory on the nutritional value of local food will continue to be ineffective unless it is directed away from nutrition towards culturally determined values like food acceptability and choice. Perhaps a demonstration of status of Pacific food will be through use during official and exclusive national functions, or during the parties and celebrations of the new elite Pacific islanders; a case of putting local food where the month is.

AVAILABILITY

In the Pacific countries, an increase of food production is not necessary for improved food availability. This is not to say that food production should stagnate, but to point out that improved harvesting of the current food sources, proper distribution and marketing, and decreased wastage (e.g. post-harvest loss) may be all that is needed. To promote this, policy-makers must cease to be cynical, and stop maintaining policies that benefit politically powerful groups and harm the nutritionally vulnerable. For example, in Tonga, the exemption of flour from duty and sales tax, and the exclusive availability of bread for sale on Sundays have made investments on this poor quality food highly profitable. The drinking colleagues of government officials and transnational corporations gain most from this arrangements but will not encourage the production, distribution and use of local food.

A specific strategy for improved food availability, will be an emphasis on the basic production unit of the Pacific, that is, the family. The capability of this unit to be self-sufficient in food production will largely alleviate the need for a marketing and distribution system. Developments aimed at improved food production must be directed towards the improvement of subsistence agriculture and fishing not cash-crops and the amalgamation of small venture to large commercial enterprises.[14] The social and economic cost of amalgamating the food production units far outweigh any advantage.[15] Much more is being spend coping with the resultant problems and in the attempts to reverse the trend.[15] Socially, small food production units in the Pacific countries will reinforce the economic basis of the family and kinship of reciprocity. Economically, this approach will improve access to food and evenly distribute the benefits of increased production, without the endless wait for the elusive trickle down effect of the economy of scale.

If there is an adequate food supply, good nutrition and health can be expected. However, this is not necessarily true.[17] An abundant food supply does not ensure good nutrition and health because factors that affect food availability and demand will influence food consumption pattern; similarly the biological utilization of food is affected by various physiological and disease states. The distribution of food within a country also vary and is never equitable, the poor and underserved usually being worst off.[2] Within a family, the distribution of food may fail to meet physiological requirements of some of its members, particularly the mothers and pre school children.

The availability to the individual of an adequate and secure food supply is not solely dependent on food distribution. Other factors include income relative to prices, frequency of disasters, methods of food production, marketing and transport systems, political and religious belief, economics disaparities, and land tenure systems. All these factors are outside the realm of nutrition but within those of food availability. Therefore viewing the availability of food for its multiplicity of uses, and as a desirable end point, will immediately dictate addressing the core of these issues. However, if the orthodox view of the primacy of nutrition is maintained, there will be a continuation of the reproduction of the power relations that are the primary cause of disparate food availability. For example, the overwhelming belief is that reproductive behaviour (population growth) is one of the main causes of food shortage; consequently population controllers seek to decrease population growth in an attempt to suppress the diners rather than modifying the system to increase food availability and the number of dinners.

Affordability and cost

The ability to acquire food depends on various factors of which household income and the prices of basic commodities are the most important influences. Increases in food availability that are not accompanied by an increased economic capability of the consumers to obtain the required food, cannot be expected to show

improvement in health. An example is the "Green Revolution", which despite gains in production, did not by itself result in the increase availability of food to the poor and needy.[18] Therefore the emphasis on food prices in critical to the ability of the poor to make food choices and to acquire it for societal use. The increasing economic disparities between nations, the unreasonable distribution of income and other resources within nations, and the poor distribution of food within the family contribute to the failure to combat food shortages. An increase in food production parallel with food pricing policy to enchance the purchasing power of the poor, is essential for any redistribution to occur. In such a situation there is clearly no place for foreign food aid. The latter can only be justified if there is not a high elasticity of substitution between food aid and locally available food. Tinned fish and flour aids definitely substituted for fresh fish and root crops, respectively.[4,11,12]

Carefully designed price policies can increase the real income of the poor.[2] The basic concern of such food price policy should be to enable those in need to consume more of their habitual foods and to provide sufficient in entive to producers to ensure the supply of the food. Such policies are practically absent in the Pacific. Some attempts have been implemented through duties and taxes but these have not been high enough. Subsequently, the cost of imported food have remained relatively unimportant in relation to the other factors affecting the consumers' food choices (e.g. habit, status, and ease of preparation), let alone encouraging local producers. Therefore the effects of food prices extend beyond the present through their impact on savings and investments, both of which are highly sensitive to price variations.[19] Inadequate pricing policies have even cancel out the positive income distribution effect of land reforms.[14] In addition, even when the long term food availability is satisfactory, short-term changes in supply (e.g. cyclones, floods, and droughts) can lead to wide fluctuations in prices.

The pattern of food available and consumed can be modified by subsidy or taxation policies.[2] Direct subsidies and preferential taxes can encourage expansion of the demand and supply of food which can be marketed at a price the poor can afford. Taxation of poor quality food can be used in the opposite way to discourage its consumption and thus diverting the demand towards better foods. Quite often an inefficient marketing system also has the effect of making prices very high to the consumer without the farming community benefitting. Also, at the national level, emphasis on export crop production will reduce overall food availability and thus increase prices, and at the same time may emphasise maldistribution of export income at the community and household level.[20] However, some subsidy schemes have had negative effects on food choices due to public ignorance and partially interested policy-makers.[14] Therefore policy consideration to improve food availability through lower prices must include investments in food production technology to increase productivity, import policies, measures to achieve an efficient internal marketing system, establishment of credit infrastructure that protects the farmer, education, subsidies to cover the farmer between planning and initiation of output, promotion of home gardens, and improve information and market forecasts available to the food producers.

The Last Dimension: Health

The triad of food choice, availability, and cost determines food use in a society. The latter lead to health, that idyllic and elusive "state of complete social, physical and mental well-being".[21] The health effects may be due to physical damage of poor quality and insufficient food (e.g. rickets, pellagra); changes mediated through social variables (e.g. the use of lollies for reward food enhance the development of dental caries); or food used to provide supportive social network which in turn is protective against ill-health. Other more subtle health changes due to the utilization of the wrong food include lowered productivity of wor-

kers, impaired psychomotor development of children, and increase susceptibility to disease.[22] Sometimes changes may be of the preclinical disease states, e.g. adverse biochemical and physical changes with urbanization, which increase disease risks of many South Pacific population.[4]

As the incidence and prevalence of the health consequences increase, changes in food utilization will inevitably occur. The direction such changes will take depends on the response of the Pacific community to the health consequences. At the best the realisation of the negative trends may contribute to a reversion to the use of food items that will be conducive for health as a strategy for primary prevention. However, the South Pacific community may choose to modify only the diets of those with clinical diseases and the rest to continue with the present negative trend of food use till the resultant ill-health interfere with their other preoccupations. The choice made will change the supply and demand equilibrium, and subsequently the dynamic of the triad of food choice, availability and cost. That is, health ultimately affects this triad, thus completing a dynamic cyclical relationship with the other important determinants of food and its use by society.

Conclusion

In short, the impact of health programmes must address food and its use rather than nutrition. The most important areas are food choices, availability, cost, and their relationship to the social processes of Pacific societies. For improved programme effectiveness, these factors must be addressed in relation to the breakdown of traditional network along which food flowed, changing aspirations and value systems, decline in knowledge of traditional metods of food gathering and preparation, and occupational changes demanding regularised meals and limited food preparation time. The ultimate goal have to be a change in the disparities of access to the relatively abundant food supply of the Pacific countries.

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