

Chapter 18

Eating Habits of Young Persons for Healthy Aging: An Exploratory Study Involving University Students in Hong Kong

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ABSTRACT

Fruits and vegetables are important parts of healthy eating and they provide excellent sources of vitamins, minerals, and dietary fiber in our diet. Those who consume fruits and vegetables regularly have a reduced risk of many chronic diseases. According to the WHO, inadequate consumption of fruits and vegetables may have contributed to as much as 14% of gastrointestinal cancer deaths and 11% of deaths resulted from ischemic heart disease worldwide. Since 2011, Hong Kong has been promoting a “2 Plus 3 a day” diet campaign aiming to raise the general public’s awareness on consuming a minimum of 2 portions of fruits and 3 portions of vegetables a day. However, recent statistics showed that nearly 81% of people aged 18 – 64 failed to meet this requirement. This paper focuses on investigating the determinants of fruits and vegetables consumption behavior among university students in Hong Kong.

INTRODUCTION

Ageing has become an urgent socioeconomic issue around the world in the last decade. In less than 15 years from now, researchers estimate that the number of people aged 65 years and over in the global population will increase to more than one billion, meaning that there will be one elderly person for every eight people. In Hong Kong, the population of people aged 65 years and over is projected to rise markedly from 13% in 2011 to 30% in 2041. Correspondingly, the median age would rise from 41.7 in 2011 to 49.9 in 2041. The changing age structure of the projected population can also be reflected in

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the overall dependency ratio which is defined as the number persons aged 15 and below, and those aged 65 and over per 1000 persons aged 15 – 64. The ratio is projected to rise from 333 in 2011 to 645 in 2041 (Census and Statistics Department, 2012). This rapid ageing tendency will not only change family and workforces structures, increase the burden on the productive part of the population to maintain the upbringing of economically dependent people, but also result in increased demand for social security matters such as pensions, housing, and healthcare. This increased demand will in turn lead to higher public healthcare expenditures. Nonetheless, a healthy lifestyle that consists of multiple healthy behaviours such as adopting a healthy diet with high intakes of fruits and vegetables, exercising regularly, avoid drinking alcohol and smoking, can play a significant role in healthy and active ageing, reducing the overall demand for healthcare services (Glanz, 2008).

As people age, their health deteriorates and the risk of contracting diseases increases correspondingly. Chronic conditions affect a significant proportion of society and, although they are commonly associated with older people, the prevalence of them is increasing in all age groups (Conn, 2011). A recent cross-sectional study found that over 42% of Scots living in the United Kingdom had one or more co-morbidity with almost a quarter of those studied being classed as ‘multi-morbid’ (>2 co-morbidities) (Barnett et al., 2012). Around 70% of healthcare expenditure in the United Kingdom and Australia is spent on providing care for people with chronic conditions and the elderly population account for a significant proportion of this (College of Medicine, 2013). As the global population ages, the prevalence of people with chronic conditions is set to increase. A healthy lifestyle can also enhance individuals’ perceptions of being healthy, and have an impact on mortality and morbidity as a result (Mossey, & Shapiro, 1982). Hence, promoting healthy behaviours and forming healthy lifestyles would be a sound investment from the health policy makers’ perspective.

In this chapter, the perceptions and dietary habits of university students and how this may impact on their social responsibility in promoting health, will be explored, and also the long-term consequences of poor fruit and vegetable intake will be discussed. Instead of providing guidelines and suggestions, it is hoped that this chapter will not only provide new perspectives to the role higher education plays with regard health promotion and education, but it also aims at generating reflection and discussion among readers on the topic of health promotion.

THE CASE OF HONG KONG

The Hong Kong health system has often been admired by others for its ability in providing some of the best vital statistics when compared to other developed countries. In 2015, the average life expectancy at birth in Hong Kong was 87.3 for women and 81.2 for men, being one of the highest in the world; while the infant mortality rate in Hong Kong was 2 per 1,000 live births, being one of the lowest in the world (Food and Health Bureau, 2016). Healthcare services are relatively affordable in Hong Kong in which all of its citizens are eligible to receive care from public hospitals and clinics at a heavily subsidized rate.

In spite of these strengths and a currently well-endowed service provision (\$ 57 billion HKD in 2016-17), the Hong Kong health system is facing challenges with an increasing demand for services driven by an over-dependence on acute care, changing patient culture and most important of all, an ageing population. According to some of the recent projections by Chung et al. (2009), the population of Hong Kong is ageing much more rapidly than previously expected. Other statistics predicted that population ageing in Hong Kong is expected to be most rapid in the coming two decades with the proportion of

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