



Prapant P Boekahal, Prapant Pwanitien, Unaporn Chitthang, Achiraya Kamchar, Pransert Bangsatsitjai, Charn Sapatuen, Somchok Klumsumong, Pripi Kongkanya
Institute of Nutrition, Mahidol University, Pathumthani 4, Salaya, Nakorn Pathom 73170, Thailand

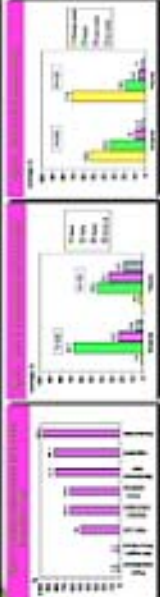
Prapant P Boekahal, Prapant Pwanitien, Unaporn Chitthang, Achiraya Kamchar, Pransert Bangsatsitjai, Charn Sapatuen, Somchok Klumsumong, Pripi Kongkanya
Institute of Nutrition, Mahidol University, Pathumthani 4, Salaya, Nakorn Pathom 73170, Thailand

Recently and previously it are currently overlooked serious health problems among children. Our investigation of such a community, the early literature, is one of the most important studies of 1980 (Henderson). This study aims to develop information, thereby providing evidence for public education. It is also to assist the community to understand the relative value of a food. Two consumer-specific models were developed. Namely, the first model, multiple light model, nutrient model and raised food model. Each was composed of patients with essential hypertension, patients related to non-communicable diseases and two models included at least two essential nutrients. The use of green, yellow and red colors are to demonstrate the real, medium and high amounts of the nutrients of interest. This developed model was comprehensively tested in 433 women, 305 healthy children and 160 patients. The model attractive model was particularly used as a nutrient model followed by the light food model for patients and for patients when they were not required to be model. When they were asked to choose the most comprehensible and appropriate model for food labeling, the multiple light food model was selected by both children and parents. It is expected that the developed model will help consumers' food.

Recently and previously it are currently overlooked serious health problems among children. Our investigation of such a community, the early literature, is one of the most important studies of 1980 (Henderson). This study aims to develop information, thereby providing evidence for public education. It is also to assist the community to understand the relative value of a food. Two consumer-specific models were developed. Namely, the first model, multiple light model, nutrient model and raised food model. Each was composed of patients with essential hypertension, patients related to non-communicable diseases and two models included at least two essential nutrients. The use of green, yellow and red colors are to demonstrate the real, medium and high amounts of the nutrients of interest. This developed model was comprehensively tested in 431 women, 300 healthy children and 100 patients. The model attractive model was particularly used as a nutrient model followed by the light food model for children and the nutrient for patients when they were asked to choose the most palatable and the most acceptable and appropriate. When they were asked to choose the most palatable and appropriate model for food development, the multiple light food model was selected by both children and parents. It is expected that the developed model will help consumers to select nutritious foods.

[illegible]

Nutrition labeling is believed to be one of the various strategies for promoting rational choices among consumers seeking information on how to make healthy food choices. In 1967, a survey was conducted in "Tweed's", a fictitious eatery, to determine the information on the food label used by the consumers. The first and the second information categories used were the expiration date and the ingredients. It was surprising that the third category—nutritional facts (on the food label) was used by 40% of the respondents (Figure 1). The National Nutrition Information Facts (on the food label) was officially announced in 1980 by the FDA in response to the Nutrition Labeling and Education Act (NLEA). Since then nutrition information has been voluntarily included on various kinds of food products. After 10 years of the program, a survey was conducted in 200 students and 103 parents; the majority of them fully understood the nutrition information on the label (Figure 2) and 85-90% of them needed more family labeling to assist in understanding (Figure 2).



1. **I** is a strategy (conscience) directly sensitive to information received to assist the consciousness to understand the real-life values of health for every citizen of healthy health and ensuring use of the righteous information
2. **I** is a strategy (conscience) that is a comprehensive level of the strategical system

1. **I** is a strategy (conscience) directly sensitive to information received to assist the consciousness to understand the real-life values of health for every citizen of healthy health and ensuring use of the righteous information
2. **I** is a strategy (conscience) that is a comprehensive level of the strategical system

Phase 1. Development of testing module

Four consensus-based nutrition education modules for public school children were developed (Figure 4) based on the principles that they should be attractive, be self-explanatory, easy to understand, present them the standard nutrition labelling, and should demonstrate the amounts of nutrients and not the amount of nutrients. The modules were developed for 100% of the population. The health-related nutrients of interest are energy, sugar, fat and sodium.

Phase 2. Testing of the developed module

The developed consensus-based nutrition education module was tested in 1400 school children and parents by face-to-face structured interview technique using a structured questionnaire (Tables 3 and 5).

Phase 1. Development of testing module

Four consensus-based nutrition education modules for public school children were developed (Figure 4) based on the principles that they should be attractive, be self-explanatory, easy to understand, present them the standard nutrition labelling, and should demonstrate the amounts of nutrients and not the amount of nutrients. The modules were developed for 100% of the population. The health-related nutrients of interest are energy, sugar, fat and sodium.

Phase 2. Testing of the developed module

The developed consensus-based nutrition education module was tested in 1400 school children and parents by face-to-face structured interview technique using a structured questionnaire (Tables 3 and 5).

[illegible][illegible][illegible][illegible][illegible]

- [illegible]