

In this issue

Adolescence is a critical life-stage that is characterised not only by considerable physical growth and development but also by changes in mind and spirit. It involves the adolescent moving from the socio-cultural environment of the child through to that of the adult, which for many can be challenging and traumatic. As a result it deserves to be a focus of public health nutrition research and practice.

In this issue a number of papers focus on public health nutrition issues pertinent to adolescence. In a life-stage characterised by significant growth and development and the associated changes in body composition, it is not surprising that adolescence is a focus of research relating to overweight and obesity. Reddy *et al.*⁽¹⁾ report on data from a South African survey of 9224 adolescent school-aged children and describe differences in the distribution of overweight and obesity by sex, racial heritage and socio-economic status. In a country in nutrition transition experiencing both forms of malnutrition, they conclude that ongoing surveillance of malnutrition mindful of gender, racial and socio-economic disparities is important.

Data on what adolescents eat is clearly an important source of intelligence to inform the development, implementation and evaluation of effective public health nutrition interventions in this group. Joyce *et al.*⁽²⁾ present data on fat intakes from two Irish population samples which identify a low level of compliance with recommendations regarding SFA intake among children, adolescents and adults. Baldini *et al.*⁽³⁾ report on a study that suggests the diets of young people in Spain and Italy are moving away from the traditional Mediterranean dietary pattern considered by many to be health-promoting. This implies that adolescence may be an important life-stage for public health nutrition intervention.

Adolescence is characterised by heightened personal awareness of body image associated with changes in body shape, pubescence and increasing sexuality. Is it any surprise therefore those adolescents under- and over-report

issues such as body weight and related dietary practices in societies that overly emphasise beauty in its physical dimension? Vance *et al.*⁽⁴⁾ report on Canadian data comparing energy intake with estimated BMR to find evidence of under-reporting of energy intake among both genders but greater among females and increasingly so with increasing weight status. Vagstrand *et al.*⁽⁵⁾ describe that misreporting of energy intake is not limited to under-reporting among Swedish teenagers and their mothers.

These studies reinforce the view that caution needs to be exercised when relying on self-reported dietary data among young adults, particularly in the context of body weight.

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References

1. Reddy SP, Resnicow K, James S, Kambaran N, Omardien R & MBewu AD (2009) Underweight, overweight and obesity among South African adolescents: results of the 2002 national Youth Risk Behaviour Survey. *Public Health Nutr* **12**, 203–207.
2. Joyce T, Wallace AJ, McCarthy SN & Gibney MJ (2009) Intakes of total fat, saturated, monounsaturated and polyunsaturated fatty acids in Irish children, teenagers and adults. *Public Health Nutr* **12**, 156–165.
3. Baldini M, Pasqui F, Bordonni A & Maranesi M (2009) Is the Mediterranean lifestyle still a reality? Evaluation of food consumption and energy expenditure in Italian and Spanish university students. *Public Health Nutr* **12**, 148–155.
4. Vance VA, Woodruff SJ, McCargar LJ, Husted J & Hanning RM (2009) Self-reported dietary energy intake of normal weight, overweight and obese adolescents. *Public Health Nutr* **12**, 222–227.
5. Vagstrand K, Lindroos AK & Linne Y (2009) Characteristics of high and low energy reporting teenagers and their relationship to low energy reporting mothers. *Public Health Nutr* **12**, 188–196.