

# [Essay on diet analysis and comparison](https://assignbuster.com/essay-on-diet-analysis-and-comparison/)

[Health & Medicine](https://assignbuster.com/essay-subjects/health-n-medicine/), [Obesity](https://assignbuster.com/essay-subjects/health-n-medicine/obesity/)

## Section A: Food Analysis

6-12 months
I would consider diet to be too much for 6-12 months infants. As opposed to the high protein, carbohydrate , vitamins, fats and omega -3 fats in my diet , an infant at this stage would require much lower levels, that is, 95 grams of carbohydrates, 30 grams of total fat and 11 grams of protein every day. My Omega-3 daily intake was far below the daily requirements of an infant within this age bracket. My Omega-3 intake was 137 mg per day and the average protein, carbohydrate and fats intake was 164mg, 346mg and 500mg respectively.

## 4-6 year old

My diet appears to be little compared to a 4-6 years old child. This child typically requires about 1400 calories each day (Institute of Medicine, 2011) and my food analysis shows that my calorie intake for the three days was 3027 which constitutes an average of 1009 calories per day. Thus, if the children in this age bracket consumed this number of calories they would not be fulfilling their daily calorie requirement. In addition, the micronutrients like calcium, iron vitamin C and body acids are required in large amounts by the members of this age bracket and from this analysis, there appears to be a deficiency of these critical nutrients. However in terms of micronutrients that includes carbohydrates, proteins and fats, the amount in my diet would, be considered too much for members of this age bracket. For example, the child requires about 19 grams of proteins per day and my diet indicates an average of 42 gram per day which is actually too much. My fluid intake is also considerably less than would be required by members of this age bracket.
13 years female
At this stage females require foods rich in carbohydrates and protein. Iron is equally needed as menstruation starts at this point. My diet would favor this group of people since the quantities needed per day are within the parameters recommended for this group, except for proteins and carbohydrates which are in excess. My daily iron intake is 20mg, whereas the iron requirements for a 13 year old female is 15-20mg. Females at this age require almost an equal amount of Calcium for bone strength and formation. 13 year old females require 1845 calories, 41. 2g of proteins and fats 76. 4 mg of fats per day. Proteins and fats in my diet would be too much.

## Females over 70 years old

The calorie requirement for a 70 year old woman is about 1450 per day (Institute of Medicine, 2013) and my diet would therefore be not sufficient for such a person. In terms of micronutrients, their daily requirement is relatively low, for example, they have a reduced requirement of iron (14g) which is fairly consistent with my diet. In terms of macronutrients, their carbohydrate requirement is similar to one in my diet. However, they require a larger intake of proteins (57 per day) and this also consistent to the one in my diet which is about the same figure. My fluid intake is also inadequate to the requirements of the older women. They require a higher intake of fluids since they are more prone to dehydration effects.

## Improvements

6-12 months
If I were 6-12 months old infant, I would increase Omega-3 intake and reduce fat, protein and carbohydrate intake. Excess intake of fats, carbohydrates and proteins can lead to obesity. In my diet I would include iron since breast milk is low in Iron.

## 4-6 years olds

As revealed in my diet, my diet seems to lack sufficient amount of nutrients required by 4-6 year olds. The first improvement that I would incorporate would be to add the amount of daily calorie intake. In addition, I would also add the amount micronutrients especially metals like calcium which are required in the strengthening of bones and also vitamin C which is one of the most critical vitamins in the children. I would also check on the macronutrients intake requirements and make necessary adjustments. The other improvement relates to the fluid intake which is very lacking in my diet and to cater for this, I would ensure that there is more fluids like water and fruit drinks in the diet.
13 years female
Except for proteins and carbohydrates, which are in excess, all other aspects of my diet would remain the same if I were a 13 year old female.
70 year old female
The first dietary improvement that I would make relates to the calorie intake. To reach the 1450 calorie intake requirement, I would make the necessary diet improvements across all nutrients. For example, I would increase the amount of protein intake and regulate the carbohydrate and fat intake. In terms of micronutrients, I would maintain the same intake iron mineral but would be swift to include check on the calcium intake which is a very crucial mineral for the older people. As stated earlier, females in this age bracket are very prone to dehydration effects and to check on this. I would add the amount of daily fluid intake.

## Comparison essay

In order to achieve the diet and nutritional requirements across various age groups and various society members, several food assistance programs have been established. The following essay will look at some of the available food programs for different society age groups and classes.

## Infants

The Special Supplemental Nutritional Program for Women, Infants and Children (WIC) is a food assistance program that caters for the food requirements of women, infants and children. For example, in terms of the WIC promotes infant breastfeeding as the most favorable infant feeding method. The program also provides free nutritional classes for mothers so as to help them understand the nutritional requirement of the infants (Besharov and Germanis 2000).

## Child

Family socio-economic status may bar many children from enjoying the recommended diets. Poor families struggling with low incomes may find it difficult to meet all the nutritional requirements of their children. The United States Department of Agriculture through SNAP has been able to provide nutritional support to millions of children from poor backgrounds through various child nutrition programmes. Examples of such programmes include; Child and Adult Care Food Program (CACFP), National School Lunch Program (NSLP) and Fresh Fruit and the Vegetable Program (FFVP). Over 2. 5 million children in USA receive nutritious snacks and meals under the CACFP. The NSLP on the other provides lunch to various selected elementary schools. As a weapon to combat child obesity, FFVP provides fresh juice and vegetables in order to cut down fat and carbohydrate intake that can lead to obesity.

## Elderly male

Similarly, a sizeable population of elderly males is barred from enjoying the recommended diets. This is occasioned by family background and socio-economic status. Through SNAP’S programs for the elderly, provides nutritional support to elderly makes from poor families. Poor families are eligible to register their elderly male members with SNAP, whereby, they receive meals and nutritional supplements in order to fight the old age related health problems such as diabetes and high blood pressure.

## Pregnant Female

Pregnant women are eligible for the receipt of nutritional or food assistance from WIC. The program assists pregnant women to stay healthy and eat right. It does this by educating them about proper nutrition accompanied by personalized assessments. In addition, the WIC provides pregnant women with dietary supplemental food.

## Advantages and disadvantages

The WIC program has been applauded for the nutritional help that it has provided to the relevant community members. One advantage of this program is that it targets all society members and not just the poor. For example, a family that is well to do but has adopted a foster child is eligible to receive the benefits of the program. The program’s income limits are not as small as those of other programs.
On the other hand, there are several cons associated with the program. For example, some of the required nutritional classes often prove difficult to attend especially for people who lack efficient transportation. The fact the program only supports the breast feeding program (where the women are given nutritional supplements) for only one year has also been faulted. The strenuous process of dealing with the different WIC stores that have different stores is another disadvantage (Besharov and Germanis 2000).
One advantage of nutrition programs under SNAP is that the programs are broad to cover as many people as possible. Another advantage of SNAP’s programs is that they not only provide nutritional support but health care and education . Moreover, this program has been on the forefront in the fight against obesity among children and diabetes among the elderly in the United States (Larsen 2011). The registration process have sometimes appeared to be cumbersome in that, SNAP offices are only located in the state headquarters, something that may bar many people to register due to the transport expenses. Registration in some states may be denied to lack of utility bills and other documents required soliciting for support.

## Eligibility for the programs

The WIC stipulates that for one to be eligible for the program, one must either be a pregnant, breastfeeding or a mother who just had a baby, infants and children below the age of five and families with income below 185% of the national poverty income guidelines (Besharov and Germanis 2000).
Parents intending to register their children with SNAP can download application forms from the SNAP website or alternatively visit the states’ SNAP offices(Larsen 2011). During registration, in some states, parents wishing to register their children with any of the SNAP child programs may be required to present housing information, child support orders, bills and utility bills in order to ascertain whether they are legible for the chosen support programs.

## Fight against malnutrition

Both SNAP and WIC plays an active role in the fight against malnutrition. The mode of fighting this deficiency disease used by the two programs is very similar. Both programs give out monthly food vouchers that enable the purchase of specific diet supplementary foods for the various society that include infants, low income mothers.
In conclusion, it is accurate to state the existent food assistance programs have been very helpful in assisting members for the society with both food and information regarding proper nutrition. However, there are still some areas that need to address if the American nation is start feeding right.

## References

Besharov, D. J., & Germanis, P. (2000). Evaluating WIC. Evaluation Review 24(2), 123-190. Retrieved from http://erx. sagepub. com/content/24/2/123. full. pdf html
Larsen, L. (2011). Diet and nutrition sourcebook: Basic consumer health information about dietary guidelines, servings and portions, recommended daily nutrient intakes and meal plans, vitamins and supplements, weight loss and maintenance, nutrition for different life stages and medical conditions, and healthy food choices. Detroit, MI: