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A STUDY ON DIETARY HABITS AMONG ADOLESCENTS AND TO CREATE AWARENESS ON BALANCED DIET

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Abstract

Students between the age of 13-19 gain new experiences and personal freedom as well as develop a sense of identity as they ascend from adolescence to adulthood. Unfortunately, during this phase, the tendency to engage in unhealthy dieting, meal skipping, and fast-food consumption is rather common. Poor eating habits and limited physical activity can likely increase the risk for osteoporosis, obesity, hyperlipidaemia, diabetes, and cancer later in life. The purpose of this investigation is to examine the eating behavior of young population. The present study helps to examine the kind of food adolescents eat and how they make decision regarding food consumption. The questionnaire method was used to know the dietary habits of adolescence students , which includes questions about gender, convenience, and student eating habits, the sample size comprised of 100 students in St anns college the result showed that 40% of adolescents feel that breakfast is an important meal, 50% prefer mostly fruits and vegetables, 60% have a habit of skipping meals, 62% consume breakfast daily,40% consume junk food twice a week, 54% consume soft drinks with fast food, 80% consume fast food daily . Awareness was created among adolescent students by explaining the importance of balanced diet through distributing the pamphlets, it includes the information like which foods to be included in the diet and the ways to maintain the healthy dietary habits.

Keywords: - physical activity, eating behavior, junk food, importance of balanced diet.

Introduction:

Adolescence (from Latin adolescere, meaning "to grow up") is a transitional stage of physical and psychological human development that generally occurs during the period from puberty to legal adulthood (age of majority). The period of adolescence is most closely associated with the teenage years, though its physical, psychological and cultural expressions may begin earlier and end later. For example, although puberty has been historically associated with the onset of adolescent development, it now typically begins prior to the teenage years and there has been a normative shift of it occurring in preadolescence, particularly in females (see precocious puberty). Physical growth, as distinct from puberty (particularly in males), and cognitive development generally seen in adolescence, can also extend into the early twenties. Thus, chronological age provides only a rough marker of adolescence, and scholars have found it difficult to agree upon a precise definition of adolescence.

Nutritional needs during adolescence are increased because of the increased growth rate and changes in body composition associated with puberty. The dramatic increase in energy and nutrient requirements coincides with other factors that may affect adolescents' food choices and nutrient intake and thus, nutritional status. These factors, including the quest for independence and acceptance by peers, increased mobility, greater time spent at school and/or work activities, and preoccupation with self-image, contribute to the erratic and unhealthy eating behaviors that are common during adolescence.

National and population-based surveys have found that adolescents often fail to meet dietary recommendations for overall nutritional status and for specific nutrient intakes. Many adolescents receive a higher proportion of energy from fatand/or added sugar and have a lower intake of a vitamin A, folic acid, fiber, iron, calcium, vitamin D, and zinc than is recommended. The low intake of iron and calcium among adolescent girls is of particular concern. Vitamin D deficiency is increasingly prevalent, and is associated with decreased bone density and probably fracture risk. Vitamin D deficiency is typically defined as 25-hydroxyvitamin D concentrations <15 ng/mL (37.5 nmol/L), and target concentrations for 25-hydroxyvitamin D are at least 20 ng/mL (50 nmol/L). Iron deficiency can impair cognitive function and physical performance, and inadequate calcium intake may increase fracture risk during adolescence and the risk of developing osteoporosis in later life.

Eating habits vary widely between individual adolescents, and also display some general trends over time, reflecting sociocultural trends in food availability and nutritional goals.

Seven food sources, including sugar-sweetened beverages, pizza, full-fat milk, grain-based desserts, breads, pasta dishes, and savory snacks, consistently contributed to this trend. Intakes of full-fat milk, meats, ready-to-eat cereals, burgers, fried potatoes, fruit juice, and vegetables decreased, whereas nonfat milk, poultry, sweet snacks and candies, and tortilla- and corn-based dishes increased through 2010. The changes contributing to the decline in caloric intake prior to 2010 included significant decreases in sugarsweetened beverages, pizza, pasta dishes, bread, and savory snacks; and significant increases in fruit.

Dietary habits and lifestyle during adolescence are risk factors for several nutrition related non-communicable diseases in adulthood. Obesity, cardiovascular disease, diabetes and some types of cancer have become the main causes of morbidity and mortality. The World Health Organization reported that the estimated mortality of cancers among Syrian adults was 65.7 and 47.2 per 100,000 for males and females, respectively, whereas for cardiovascular and diabetes diseases it was 471.7 and 326.2 per 100,000, respectively. Understanding the dietary patterns and lifestyle behaviours of both children and adults is an essential step in constructing an effective intervention programme to prevent diet-related diseases. Data on dietary habits and lifestyle among the Syrian population are very limited. A study among 6–12-year-old schoolchildren in Damascus reported an inadequate intake of fruit, vegetables, milk and dairy products, and meat. Another study on factors associated with obesity among 15–18-year-old schoolchildren in Damascu showed that carbohydrate and saturated fatty acid intakes were significantly higher among obese than non-obese children, and the contribution of bread, meat and sugar to daily intake was significantly higher among boys than girls. Both studies, however, did not compare the dietary habits or lifestyle of males and females, and they covered only a few lifestyle habits.

Good nutrition during childhood and adolescence is essential for growth and development, health and well-being, and the prevention of some chronic diseases. Yet many American children’s diets fall considerably short of recommended dietary standards. Furthermore, poor diet and physical inactivity, resulting in an energy imbalance, are the most important factors contributing to the increase in obesity in childhood. Obesity is the most pressing challenge to nutritional

health in this first decade of the 21st century (CDC, 1999). The major nutrition issues among children and adolescents have shifted from nutrient deficiency diseases, common in the first half of the 20th century, to concerns today about overconsumption, poor dietary quality, and food choices. However, food insecurity remains a concern among the poor (Briefel and Johnson, 2004). This chapter provides an overview on nutrition-related health concerns, current dietary and nutrient intakes, and dietary trends over the past 20–40 years for children and adolescents.

During childhood and adolescence, good nutrition and dietary behaviors are important to achieve full growth potential and appropriate body composition, to promote health and well-being, and to reduce the risk of Bottom of Form.chronic diseases in adulthood. Children require sufficient energy, protein, and other nutrients for growth as well as maintenance of body functions. Nutrient needs tend to parallel rates of growth. Growth continues at a steady rate during childhood, then accelerates during adolescence, creating increases in nutrient needs to support the rapid growth rate and increase in lean body mass and body size (Story et al., 2002a). During puberty, adolescents achieve the final 15 to 20 percent of stature, gain 50 percent of adult body weight, and accumulate up to 40 percent of skeletal mass (Story et al., 2002a). Inadequate intakes of energy, protein, or certain micronutrients will be reflected in slow growth rates, delayed sexual maturation, inadequate bone mass, and low body reserves of micronutrients (Story et al., 2002a).

AIMS AND OBJECTIVES

AIM:

To identify the dietary habits of adolescents and to create awareness on the importance of “Balanced diet”.

OBJECTIVES:

- To identify the dietary habits of adolescents.
- To assess the nutritional status of adolescents
- To analyze food consumption patterns among adolescents and their relationship with family and social factors.
- To collect the data or information.
- Subject the data for statistical analysis.
- To create awareness about the importance of Balance

METHODOLOGY

PLACE OF STUDY:

The study on awareness of dietary habits among adolescents was done by distributing pamphlets on how to maintain the balanced diet and the eating habits. The place of study was done in Anwar ul uloom college located at Mallepally. The people who were subjected to the awareness programme were the college and school students.

SAMPLE SIZE AND SELECTION OF SUBJECT:

The sample consists of total 100 subjects. The sample included the adolescents of age group 13-19 years. The people belonged to different place with different educational background.

TOOLS AND TECHNIQUES:

The information required for the study was collected using a questionnaire method. The questionnaire used to collect the information was developed in English.The objective of the study was kept in mind while constructing the questionnaire. It consisted of only close-ended questions with multiple choices.

GENERAL INFORMATION:

The general information was collected to get the following details like personal information of the respondent's name, gender, educational qualification etc.

AWARENESS INFORMATION:

It included the questions of close-ended type. The questions were regarding which meal is important of all the meals and whether they are aware of FIVE FOOD GROUPS or "MY PLATE".

PURPOSE AND DETAIL OF STUDY:

The study was carried out to estimate the dietary habits among the adolescents. The study was conducted in college, the participants were the inter and degree students.All the adolescent students were invited to participate in the study. The study was carried out after obtaining the consents of the students and their parents. A predesigned questionnaire was used to collect the information on sociodemographic characteristics like age, educational status, dietary habits and preference of choices and to know the importance of maintaining a "Balanced diet".

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RESULTS AND DISCUSSION

TABLE – 1: IMPORTANT MEAL OF THE DAY

OPTIONS	PERCENTAGE
Breakfast	40
Lunch	25
Dinner	30
Others	5

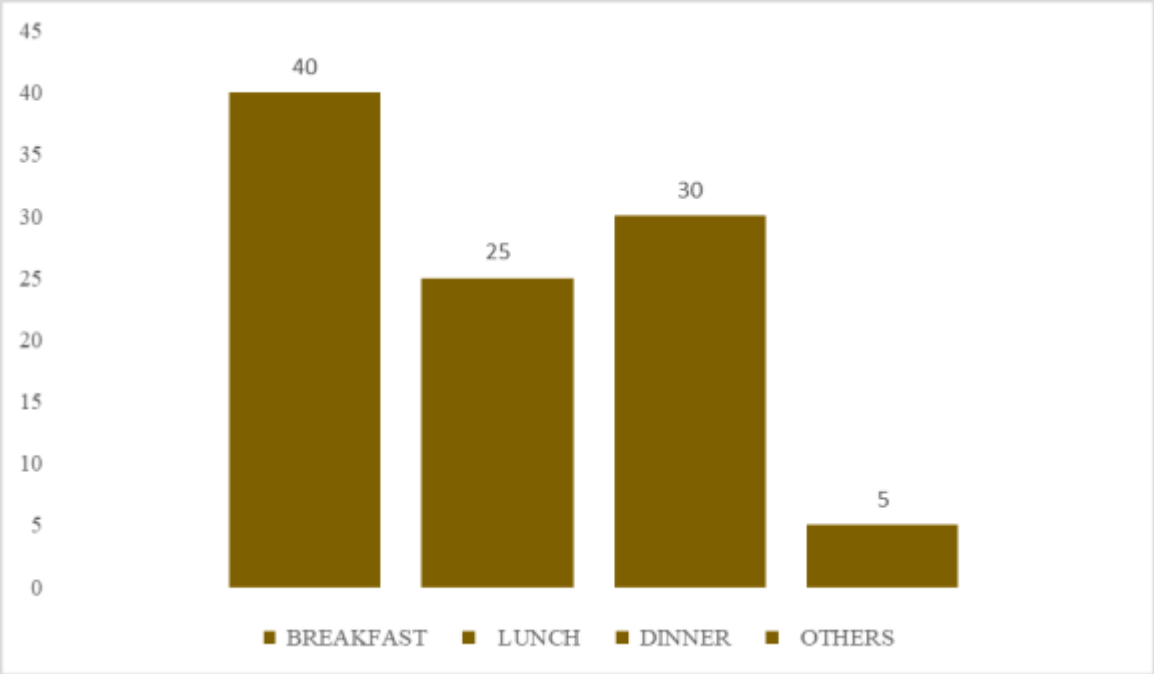

FIGURE – 1 IMPORTANT MEAL OF THE DAY

The above figure shows that 40% of adolescents feel that breakfast is an important meal,25% feel that lunch is important whereas,30% feel dinner is important and 5% feel that other meals.

TABLE-2: TYPE OF FOOD PREFERRED MOSTLY

OPTIONS	PERCENTAGE
Cereals and pulses	25
Fruits and vegetables	50
Meat and meat products	20
Milk and milk products	5

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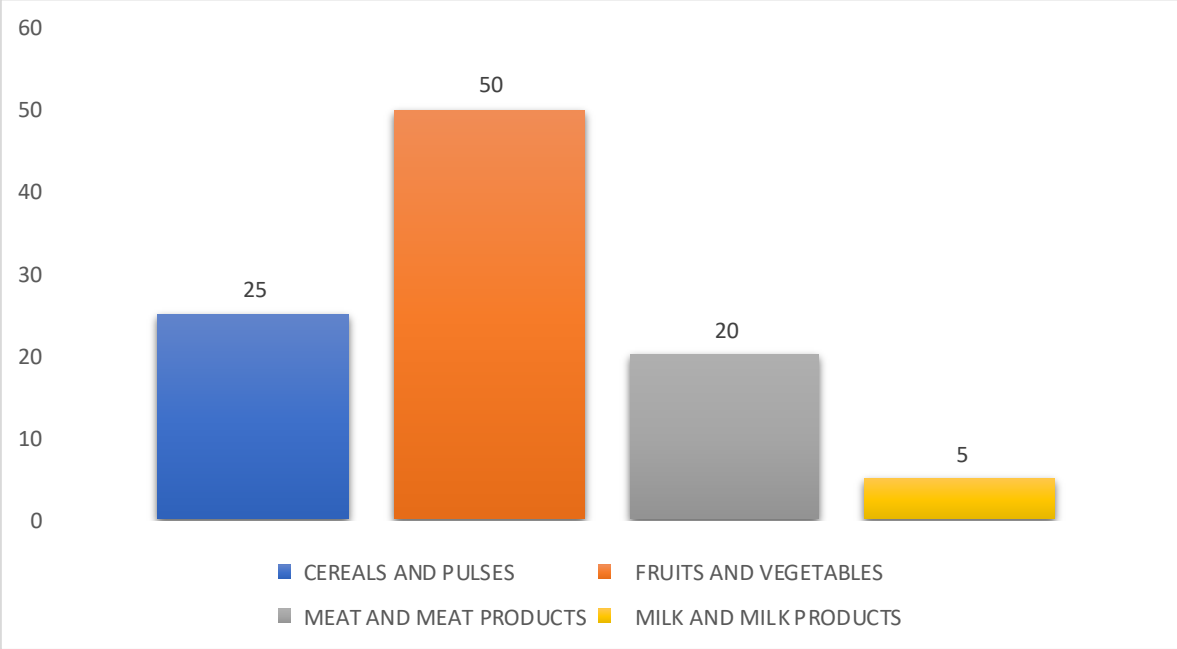

FIGURE-2: TYPE OF FOOD PREFERRED MOSTLY

The above figure shows that 25% of adolescents prefer cereals and pulses,50% gives preference to fruits and vegetables, 25% prefer meat and meat products and 5% of them consume milk and milk products.

TABLE-3: HABIT OF SKIPPING MEALS

OPTIONS	PERCENTAGE
Yes	60
No	40

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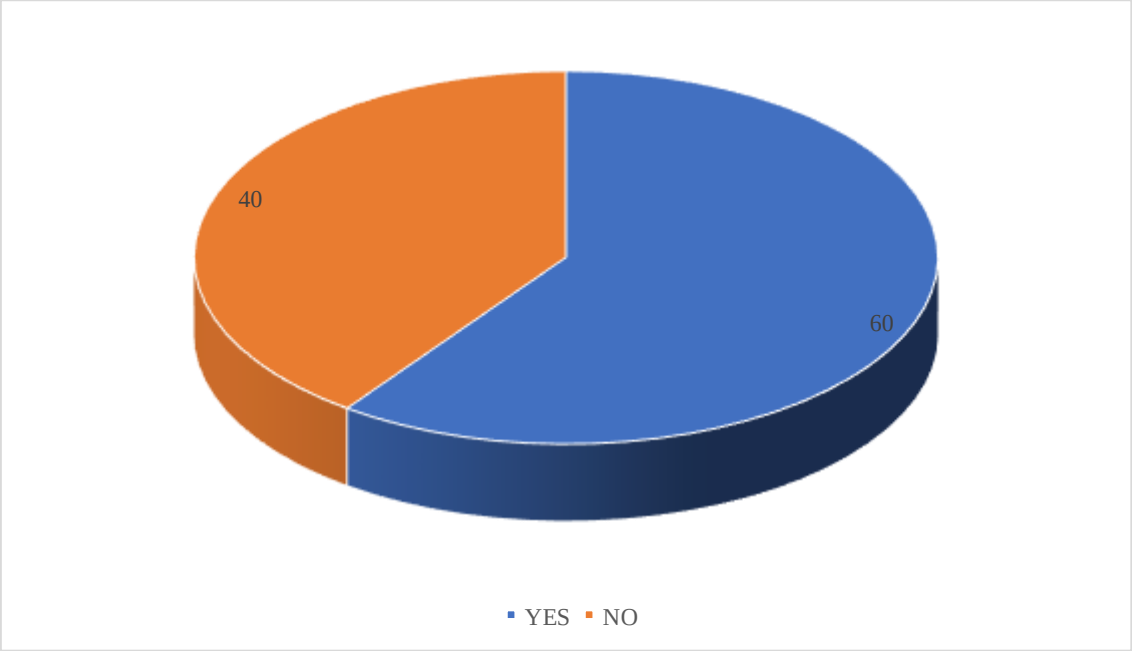

FIGURE-3: HABIT OF SKIPPING MEALS

The above figure shows that 60% of adolescents have a habit of skipping meals and 40% don't have a habit of skipping meals.

TABLE-4: SKIPPING OF MEALS IN A DAY

OPTIONS	PERCENTAGE
Breakfast	40
Lunch	22
Dinner	10
Never	28

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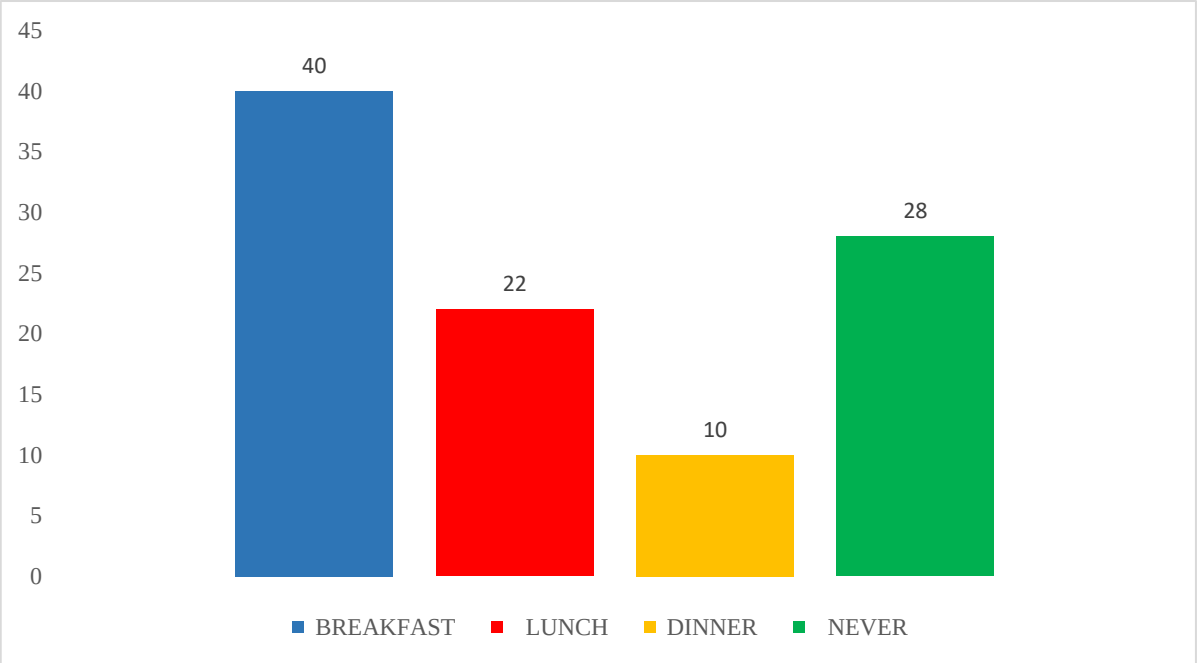

FIGURE-4: SKIPPING OF MEALS IN A DAY

The above figure shows that 40% of adolescents skip the meals daily, 22% of them skip the lunch whereas,10% skip the dinner and 28% of adolescents never skip the meals.

TABLE-5: CONSUMPTION OF BREAKFAST DAILY

OPTIONS	PERCENTAGE
Yes	62
No	38

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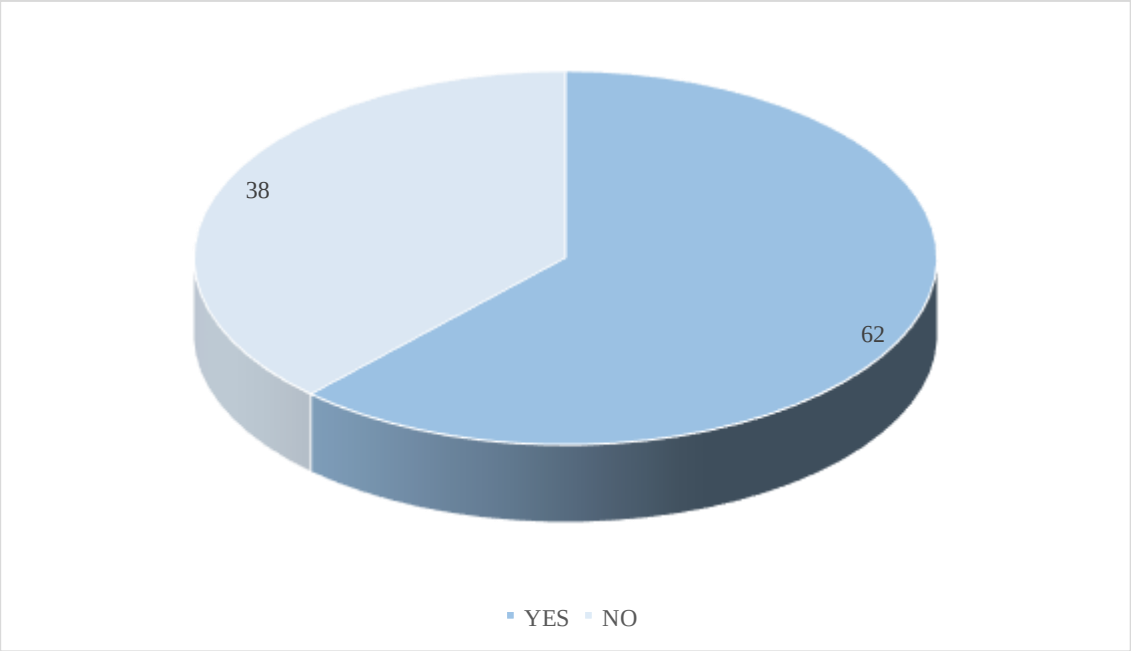

FIGURE-5: CONSUMPTION OF BREAKFAST DAILY

The above figure shows that 62% of adolescents eat breakfast daily whereas, 38% of adolescents skip the breakfast daily.

TABLE-6: CONSUMPTION OF JUNK FOOD

OPTIONS	PERCENTAGE
Daily	15
Twice a week	40
4-5 times in a month	25
Never	10

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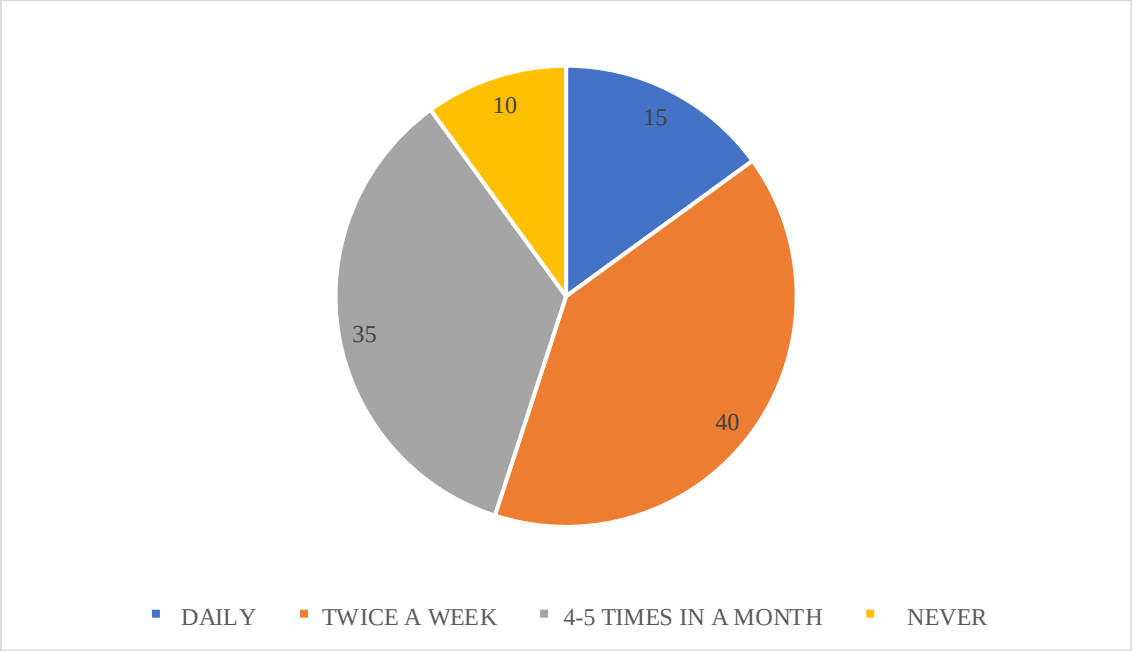

From the above figure it has been shown that 15% of adolescents eat junk food daily,40% consume junk food twice a week, 35% of adolescents consume junk food 4-5 times in a month and 10 % never consume junk food.

TABLE-7: BEVERAGES CONSUMED WITH FAST FOOD

OPTIONS	PERCENTAGE
Soft drinks	54
Coffee/tea	18
Fresh fruit juices	20
Energy drinks	8

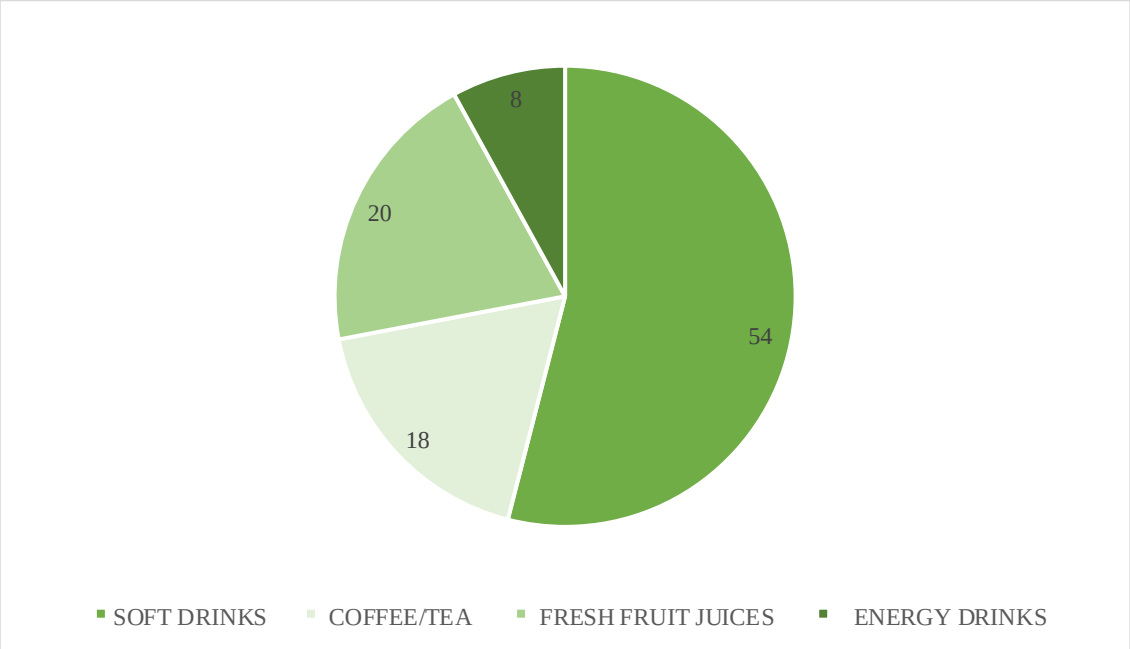

FIGURE-7: BEVERAGES CONSUMED WITH FAST FOOD

The above figure shows that 54% of adolescents consume soft drinks with fast food,18% of them drink coffee/tea, 20% consume fresh fruit juices and 8% consume energy drinks with fast food.

TABLE-8: CONSUMPTION OF CAFFEINATED BEVERAGES

OPTIONS	PERCENTAGE
Yes	54
No	46

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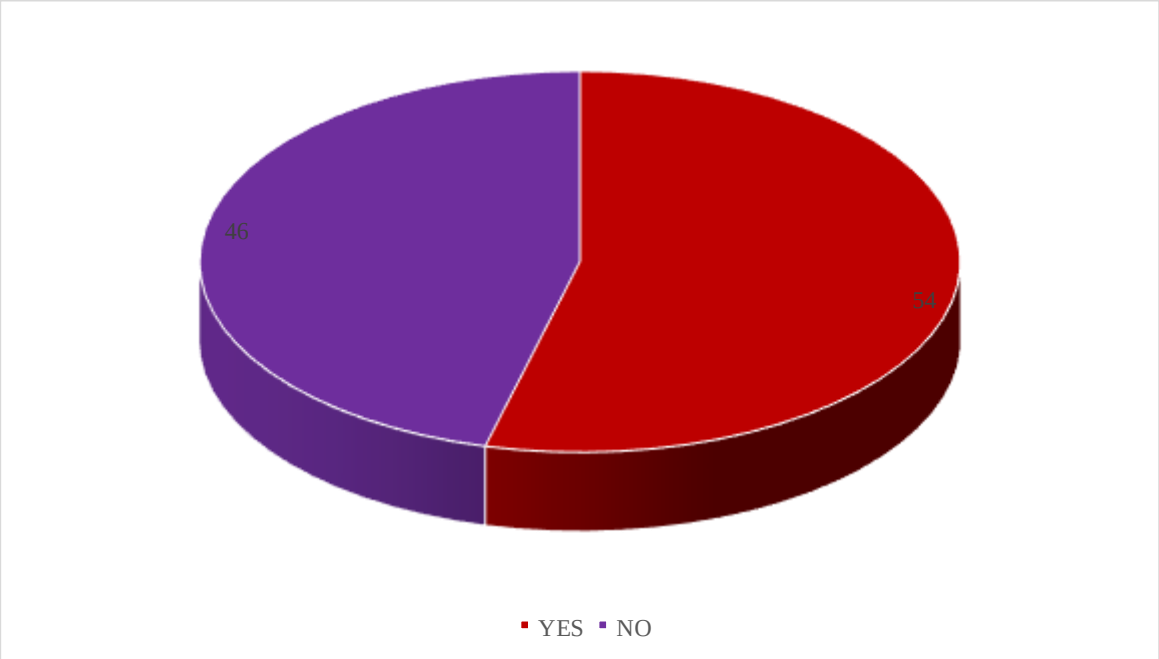

FIGURE-8: CONSUMPTION OF CAFFEINATED BEVERAGES

From the above pie-diagram it has been shown that 54% of adolescents consume caffeinated beverages and 46% of adolescents do not consume caffeinated beverages.

TABLE-9: CONSUMPTION OF FAST FOOD ON A DAILY BASIS

OPTIONS	PERCENTAGE
Yes	8
No	12
Sometimes	80

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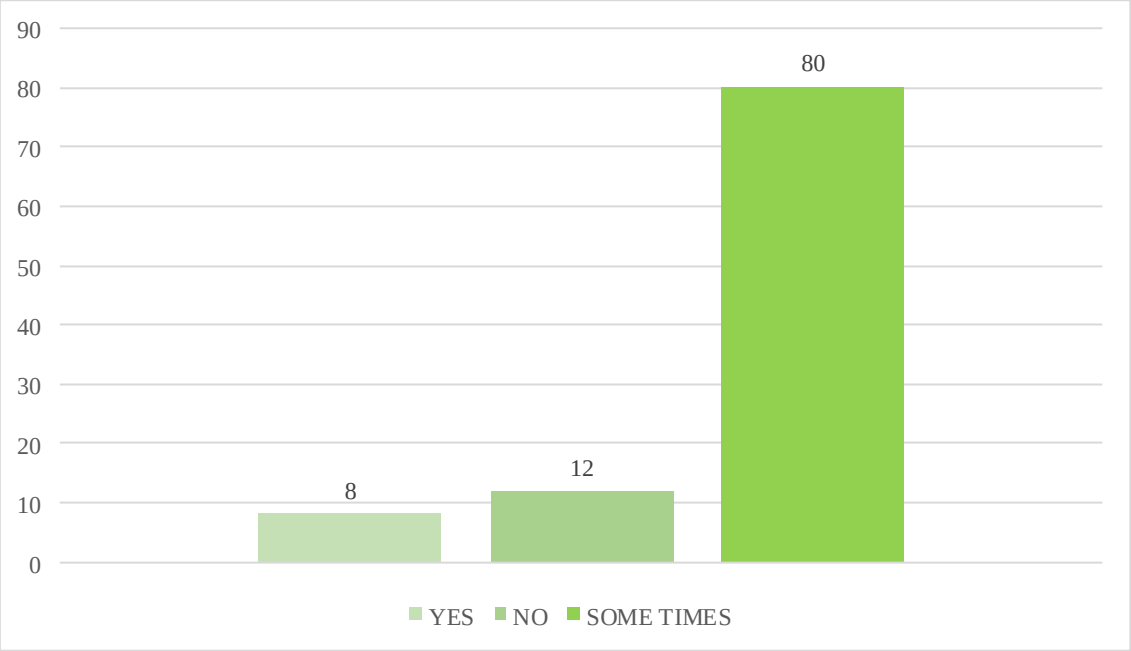

FIGURE-9: CONSUMPTION OF FAST FOOD ON A DAILY BASIS

TABLE-10

AWARENESS OF FIVE FOOD GROUPS

OPTIONS	PERCENTAGE
YES	38
NO	62

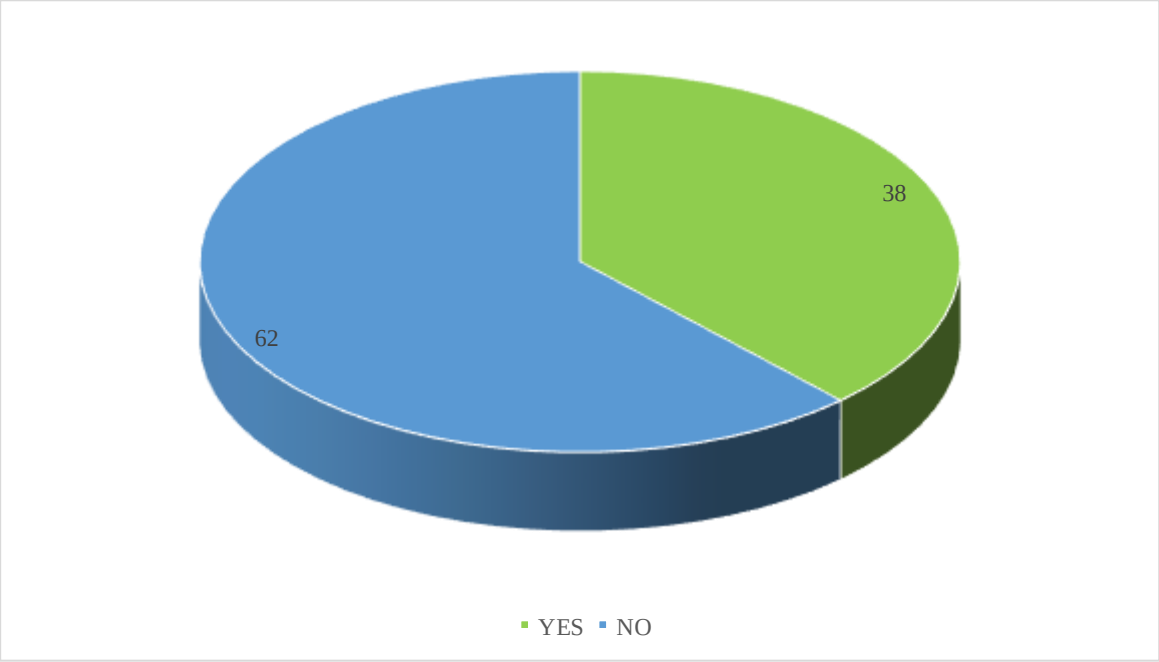

FIGURE-10: AWARENESS OF FIVE FOOD GROUPS

From the above figure it has been observed that 62% of adolescents are aware of five food groups and 38% of them are not aware.

SUMMARY AND CONCLUSION

These unhealthy eating habits are only made worse during high-pressure times such as mid-terms and finals, when eating junk food may be seen as a way to cope with stress. In addition to the other negative behavioural patterns developed through these stressful times, such as lack of sleep, students may feel that they have to compromise between health and academia.
Freshmen who are enduring the University's rigor for the first time may have an especially difficult time balancing health and school work under the belief that they must meet the University's rigorous academic standards. Furthermore, the environment that allows these eating habits to develop is not only the issue. We should also focus on how such habits are treated and how they ompact students. Students might simply feel sluggish from excessive eating or develop insecurities about the way their bodies are changing. Unfortunately, ther is no easy fix. Simple solutions such as to stop eating so much and to exercise are easier said than done. It is already challenging for students to find a happy medium of eating healthily and exercising, let alone maintaining such a lifestyle.

In school and colleges, we should not allow our peers to fall into such conditions. When we have suspicions that our peers are suffering from bad eating habits and eating disorders, we should try to help them to the best of our abilities, as opposed to believing that they are products of their own mistakes. Even if we are unequipped to help them, we should atleast provide a non-judgemental ear in order to refer them to someone who can help.

The University's academic rigor is stressful to deal with the added stress of eating habits and disorders is more than students have to endure. Thus, as students of the same institution, we should assist our peers in battling these habits and disorders, rather than dismissing these issues as something trivial. We should reform our environment into one where such topics can be comfortably discussed. Without the fear of being criticized, students suffering from bad eating habits and disorders will be able to talk about their problems and receive the proper health that they need and deserve.

The present study was conducted among adolescents and to create awareness about dietary behavior among schools and college, 100 subjects were selected, the data were collected. A questionaaire method was conducted to assess the dietary habits. 100 subjects were selected and was provide with the questionnaire to see dietary behavior we personally explained and aware them about the importance of balanced diet and not to skip the meals, and to avoid junk food and also about beverages and explain them how do they effect trheir health. Among 100 school and college students, 40% students feel that breakfast is an important meal, 50% prefer mostly fruits and vegetables, 60% have a habit of skippins meals, 62% consume breakfast daily, 4o% consume junk food twice a week, 54% consume softdrinks with fastfood, 80% consume fast food daily and 62% of adolescents are not aware of five food groups wheras, 38% of them are aware of it.

In our study we observed that the role of healthy eating in the prevention of chronic and infectious disease has been well documented. A balanced diet and consumption of food prepared in accordance with good practices are factors that contribute to maintain a healthy lifestyle. The different stages of life, in particular work or study-related, can produce profound changes in eating habits. The start of University education is an important time in the life of an individual, since it often represents a period of greater responsibility for food choices and health. The most common factors affecting food choices in this young population include changes in living arrangement.

In order to promote healthy eating among adolescents, the barriers that the students face when attempting to eat healthy should be dicussed. Some of the most common obstacles students talk about when trying to eat healthy involve both environmental and social influences. The diet of adolescents and college students is strongly influenced by common environmental factors such as time management/scxhedule, accessibility of food and location of eateries. Many students tend to schedule back-to-back classes or are involved in so many organizations that they skip meals. Oftentimes, this result in excessive calorie consumption at night. Few campus dining facilities are open late at night, causing the healthier options to be inaccessible to the students. So, students will often resort to food that is fats, convenient, and often calorie dense foods high in fat and sodium. Cost of healthy food is another reason; many college students fail to eat healthy. College students usually do not have a job or do not earn a large income, and therefore, either they do not have the money or are not willing to spend the extra dollar or two on the healthier item when cheaper, more satiating options are available, such as chips or candy. Students who have a meal plan includes options such as fruits and vegetables. Locations of eateries on campus is an important barrier to consider as well because it is likely that a student will eat at the closest dining facility, which may or may not have healthy options.

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