Original Research Article

Assess the knowledge regarding the consumption of junk food among adolescents at selected colleges of Belagavi City

Shanthini U S¹, Jagadeesh G Hubballi¹,*

¹Dept. of Child Health Nursing, kaher Institute of Nursing Sciences, Nehru Nagar, Belgaum, Karnataka, India

ABSTRACT

Good nutrition is very essential in development of children both Physically and mentally. Children must know what they eat; it affects their growth and behavior. Adolescents are not capable of understanding that the advertising is intended to manipulate their feelings and alter their behavior. There is no better time than now to build a supportive environment for nurturing children and endowing them with a legacy of good health. The objectives of the study is to assess the level of knowledge regarding consumption of junk foods among adolescents. A descriptive survey design was used for the study. Purposive sampling technique were used to collect the data. Data collected from 60 Adolescents (15-19 yrs) at selected colleges of Belagavi city. The study concludes that among 60 participants 55(91.66%) had inadequate knowledge and 5(8.33%) had moderately adequate knowledge and none of them had adequate knowledge. occupation of the father, occupation of the mother, previous knowledge of junk foods, source of information shown significant association with knowledge of adolescents regarding effects of junk foods on health.

1. Introduction

Good nutrition is very essential in development of children both Physically and mentally. Children must know what they eat; it affects their growth and behavior. Changes in our society have intensified the need for food skills, to the extent that they need to become part of the child’s basic education for good health and survival. Most people have forgotten that the primary reason for eating is nourishment. In many ways, our culture is structured to foster poor eating habits. Television commercials and supermarkets are propagating a wide variety of enticing junk foods, attractively packaged and often tagged with tempting offers.¹⁻⁴

Junk food are typically ready to eat convenience foods containing high levels of saturated fats, salt or sugar and little or no fruit, vegetables or dietary fiber and are considered to have little or no health benefits. Common junk food includes salted snack foods like chips (crisps), candy, gum, most sweet desserts, fried fast food and carbonated beverages (sodas) as well as alcoholic beverages.⁵

Obesity can have a deep effect on a child’s life, increasing risk of numerous health problems. Such as heart disease, hypertension and stroke, type 2 diabetes, high level of cholesterol and sleep apnoea. Obese children also face a higher risk of developing liver diseases, orthopedic problems and asthma.⁶

Adolescents are not capable of understanding that the advertising is intended to manipulate their feelings and alter their behavior. There is no better time than now to built a supportive environment for nurturing children and endowing them with a legacy of good health.⁷

2. Materials and Methods

A descriptive survey design was used for the study. Purposive sampling technique were used to collect the data. Data collected from 60 Adolescents (15-19 yrs) at selected colleges of Belagavi city. The structured questionnaires were used for the data collection. Permission obtained from Institutional Ethical Clearance Committee, kaher, Institute
3. Results

Frequency, percentage distribution on demographic variables of adolescents n=60

Table 1: Frequency, percentage distribution on demographic variables of adolescents

| Demographic Variables | Frequency | Percentage |
|-----------------------|-----------|------------|
| 1. Age                |           |            |
| a) 15-17 years        | 32        | 53.3       |
| b) 17-19 years        | 28        | 46.6       |
| 2. Gender             |           |            |
| a) Boys               | 29        | 48.3       |
| b) Girls              | 31        | 51.6       |
| 3. Religion           |           |            |
| a) Hindu              | 51        | 85         |
| b) Muslim             | 5         | 8.3        |
| c) Christian          | 4         | 6.6        |
| 4. Occupation of the father | | |
| a) Govt.Job           | 4         | 6.6        |
| b) Private Job        | 28        | 46.6       |
| c) Business           | 10        | 16.6       |
| d) Coolie             | 18        | 30         |
| 5. Occupation of the mother | | |
| a) Govt.Job           | 3         | 5          |
| b) Private Job        | 29        | 48.3       |
| c) Business           | 0         | 0          |
| d) Housewife          | 28        | 46.6       |
| 6. Do you know about the effects of junk food on health previously? | | |
| a) Yes                | 9         | 15         |
| b) No                 | 51        | 85         |
| 7. If yes, source of information | | |
| a) Mass media         | 5         | 8.3        |
| b) Friends            | 4         | 6.6        |
| c) Health care professionals | | |
| d) Others             |           |            |

Majority of the respondents 32(53.3%) were in the age group of 15-17 years. 28(46.6%) were in the age group of 17-19 years. Majority of the respondents 31(51.6%) were girls. Majority of respondents 51(85%) were Hindu. 4(6.6%) were Christians. Majority of respondents father 28(46.6) were working in privater sector. 4(6.6%) were in Govt jobs. Majority of the respondents mother 29(48.3%) were working in private jobs. 3(5%) were working in Govt sector. Majority of the respondents 51(85%) don’t know about the effects of junk food on health. Only 5(8.3%) know through mass media and 4(6.6%) know through friends.

Table 2: Frequency and percentage distribution of level of knowledge regarding the effects of junk foods on health among adolescent n=60

| Level of knowledge | Frequency | Percentage |
|--------------------|-----------|------------|
| Inadequate         | 55        | 91.66%     |
| Moderately Adequate| 5         | 8.33%      |
| Adequate           | 0         | 0%         |
| Total              | 60        | 100%       |

Table 2 Suggests that among 60 participants 55(91.66%) had inadequate knowledge and 5(8.33%) had moderately adequate knowledge and none of them had adequate knowledge.

Table 3: Frequency, percentage distribution and chi-square association between level of knowledge and their selected demographic variables of adolescent

| Demographic Variables | Frequency | Percentage | X2 Value |
|-----------------------|-----------|------------|----------|
| 1. Age                |           |            | X2=10.71 |
| a) 15-17 years        | 32        | 53.3       | P>0.05   |
| b) 17-19 years        | 28        | 46.6       |          |
| 2. Gender             |           |            | X2=2.81  |
| a) Boys               | 29        | 48.3       | P>0.05   |
| b) Girls              | 31        | 51.6       |          |
| 3. Religion           |           |            | X2=0.85  |
| a) Hindu              | 51        | 85         | P>0.05   |
| b) Muslim             | 5         | 8.3        |          |
| c) Christian          | 4         | 6.6        |          |
| 4. Occupation of the father | | |
| a) Govt.Job           | 4         | 6.6        | X=0.2    |
| b) Private Job        | 28        | 46.6       | P>0.05   |
| c) Business           | 10        | 16.6       |          |
| d) Coolie             | 18        | 30         |          |
| 5. Occupation of the mother | | |
| a) Govt.Job           | 3         | 5          | X2=0.02  |
| b) Private Job        | 29        | 48.3       | P>0.05   |
| c) Business           | 0         | 0          |          |
| d) Housewife          | 28        | 46.6       |          |
| 6. Do you know about the effects of junk food on health previously? | | |
| a) Yes                | 9         | 15         | P>0.05   |
| b) No                 | 51        | 85         |          |
| 7. If yes, source of information | | |
| a) Mass media         | 5         | 8.3        | X2=0.63  |
| b) Friends            | 4         | 6.6        | P>0.05   |
| c) Health care professionals | | |
| d) Others             |           |            |          |

Table 3 Suggests that demographic variables such as age, gender, religion werenon significant association with
knowledge of adolescents. Whereas occupation of the father, occupation of the mother, previous knowledge of junk foods, source of information shown significant association with knowledge of adolescents regarding effects of junk foods on health.

4. Discussion

Demographic variables such as age, gender, religion were non significant association with knowledge of adolescents. Whereas occupation of the father, occupation of the mother, previous knowledge of junk foods, source of information shown significant association with knowledge of adolescents regarding effects of junk foods on health. These findings were supported by Lt col Mercy Antony et –al (2013) conducted a cross sectional descriptive study using survey method with a sample of 208 in Pune district of Maharashtra India. The results revealed that out of 66.8% who consumed junk food, 50% of teenagers consumed junk food 3-5 times and 1-3 bottles of aerated drinks per week. 46.15% of teenagers had average knowledge about ill effects of junk food. Massimo Santinello et –al (2009) conducted a cross sectional survey among adolescents between 11 and 16 yrs in Belgium Flander & the Veneto region of Italy. The purpose of the study was focus on several lifestyle behaviors and family rules as determinant of soft drink consumption were limited to adolescent children. The results revealed that each 77 independent variables was significantly associated with daily soft drink consumption, despite some sub group.

5. Conclusion

The study concludes that among 60 participants 55(91.66%) had inadequate knowledge and 5(8.33%) had moderately adequate knowledge and none of them had adequate knowledge. occupation of the father, occupation of the mother, previous knowledge of junk foods, source of information shown significant association with knowledge of adolescents regarding effects of junk foods on health.

6. Source of Funding

None.

7. Conflict of Interest

None.

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Author biography

Shanthini U S, P G Student

Jagadeesh G Hubballi, Assistant Professor

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