



## A STUDY TO ASSESS KNOWLEDGE AND EXPRESSED PRACTICES REGARDING CONSUMPTION OF JUNK FOOD AMONG SCHOOL GOING CHILDREN

### Nursing

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### ABSTRACT

**BACKGROUND:** Present children are the investments of community in the future. Accurate nutrition in child's life will be the most important factor in preparing health, growth and development of children in their future. Growth rate is high in primary years of life and lack of necessary knowledge about nutrition is influencing factors for malnutrition incidence in children. Now days, changing dietary patterns in recent decades, nutritious snacks are substituted by junk food. Many children like to eat junk food but they do not know about harmful effects of junk food on their health.

**OBJECTIVE:** To assess the knowledge and expressed practices regarding consumption of junk food among school going children.

**METHODS:** A non-experimental descriptive study was conducted on 200 school going children, selected by convenient sampling technique. Structured Knowledge Questionnaire and Structured Practice Checklist were used to collect the data.

**RESULT:** study shows that more than half of the school going children were (55%) having good very good knowledge and (5%) were having below average knowledge. Only (30.5%) children were following healthy practices. The mean of knowledge score is higher (22.62%) than mean score of expressed practices (18.64).

**CONCLUSION:** In the nutshell, present study reveals that the half of the school going children had very good knowledge even one third of them having unhealthy expressed practices regarding consumptions of junk food.

### KEYWORDS

Knowledge, Expressed Practices, Consumption, Junk Food, School Going Children.

### INTRODUCTION

Children are always precious to their parents. Today's youth is tomorrow's nation. School going children do play a vital role in the society. The formative period of an individual is during the student phase and hence it is known to be the crucial time of life.<sup>1</sup>

'Eat healthy and live healthy' is one of the essential requirements for long life. Unfortunately, today's world has been adapted to a system of consumption of foods which has several adverse effects on health. The global problem of consuming junk food and its impact on health needs. The health education emphasis on highlighting about the eating habits, nutritional aspects, quality of unhealthy foods, their health impact and preventive measures and which can greatly contribute to its limited consumption and switching over to healthy eating habits for the better living. Health education can be given to create awareness for a change towards good eating practices<sup>2</sup>. Good nutrition is very essential in development of children both physically and mentally. Children must know what they eat; it affects their growth and behaviour<sup>3</sup>.

Fast food is the term given to food that can be prepared and served very quickly. The term "fast food" was recognized in a dictionary by Merriam-Webster in 1951. Fast food is any food that is quick, convenient, and usually inexpensive. It's delicious, it's filling, is really affordable, and readily available just any time of the day, being only a drive through phone call away<sup>4</sup>.

According to WHO reports on October 2012, world's school going population is population is 1200 million persons in 10-19 years of age, or about 19% of the total population faces a series of serious nutritional challenges.

Junk food consumption and obesity are becoming more common among school going children in developed as well as developing countries, so the aim of this study to assess knowledge of school going children regarding the harmful effects of junk food and help them to make healthy life.<sup>5</sup>

Today's school children learned that fast foods are easily available and affordable. Junk foods are typically ready to eat convenient food containing high levels of saturated fats or no other health benefits. But the health hazards considerably outweigh those benefits<sup>6</sup>.

Sushma Marita Dsouza had conducted a study in 2017 to assess the knowledge and practice of junk food consumption among students in Udupi Taluk, Karnataka, India. Total sample was 160 students were selected. Result revealed that 31.87% of participants had inadequate knowledge, 41.88% of participants had moderate knowledge and

26.25% had adequate knowledge about the effects of junk food consumption.<sup>7</sup>

In clinical posting researcher noticed that children do not have much knowledge regarding the harmful effects of junk foods. Hence researcher felt the need to assess knowledge and expressed practices among school going children regarding harmful effects of junk food and helps the school going children to maintain health.

### MATERIALS AND METHODS:

**STUDY TYPE:** Non- Experimental Approach Descriptive Survey.

**STUDY DESIGN:** Cross sectional study.

### STUDY SETTING:

Arya Public Senior Secondary School Mullana, Ambala

### STUDY POPULATION:

200 school going children regarding consumption of junk food

### INCLUSIVE CRITERIA:

The study included School going children who were:

- Able read and write English
- Studying in 8<sup>th</sup> to 12<sup>th</sup> class.
- Present at the time of data collection.

### SAMPLING TECHNIQUE & SAMPLE :

"Convenient sampling technique" was used to select the 200 secondary school going children

### STUDY TOOLS:

Sample characteristics, structured knowledge questionnaire and expressed practice check list. Content validity and reliability of tools were ensured. Data was collected by giving self administer questionnaire.

### ANALYSIS:

The collected data was entered in the MS Excel spread sheet. Analysis was done using SPSS software version 16.0.

### ETHICAL APPROVAL:

Permission for study was taken from the selected school of the Mullana, Ambala, Haryana.

### OPERATIONAL DEFINITION:

#### CONSUMPTION:

It is defined as the intake of junk food in school going children.

**JUNK FOOD:**

It is defined as commercial products which have little or no nutritional value but have plenty of carbohydrate, calorie, salt and fats.

**KNOWLEDGE:**

In this study it refers to the ability of school going children to response correctly to the questions regarding junk food. Measures by structured knowledge questionnaire and categories as very good (>75%), good (61-75%), average (51-60%), below average (≤50%).

**EXPRESSED PRACTICES:**

It refers to the ability of children to respond to items dealing with practice related to consumption of junk food as evident from expressed practice scores measured by expressed practice checklist and categories as healthy practices (>20), moderately healthy practices (15-20), unhealthy practices (<15).

**SCHOOL GOING CHILDREN:**

In this study school going children are the children who are studying in 8<sup>th</sup>, 9<sup>th</sup>, 10<sup>th</sup>, 11<sup>th</sup> and 12<sup>th</sup> standard in selected school of Ambala, Haryana.

**SCHOOL:**

In this study it refers to an educational institutional where groups of pupils pursue defined studies at defined levels, receive instruction from one or more teachers, frequently interacts with other school personnel, usually housed in a single building.

**RESULT**

The data presented in the table –1 depicts majority of students (76%) were in the age group 12-15years. More than half (55.5%) having BMI between 19-22. More than half of students (53%) were female. Most of families' income (70%) was less than 5000 Rs per month. More than half 69% were joint families, 23.5% were nuclear families. Most of the children (81%) were vegetarian, less than half (47%) mother's educational status was only high school, elementary education was 36%, 9% were graduated and 8% mothers had no formal education. More than half of father's educational status (55%) was high school education, elementary education was 24.5%, 16% were in the category of graduated and above and 4.5% father had no formal education. In Mother's occupation 58% mothers were not working and 42% were working. 70.5% children got knowledge regarding junk food from T.V., followed by 15% from mass media, 11.5% from newspapers and 3% from sale representative. 1/3<sup>rd</sup> of the children (77%) had undergone teaching program regarding effects of junk food on health any 22.5% had not attend any teaching programme.

**TABLE-1**  
**Frequency and Percentage Distribution of Demographic Variables of School Going Children**

N=200			
S.No.	Selected Variables	f	%
<b>1.</b>	<b>Age (in years)</b>		
1.1	12-15 years	152	76%
1.2	16-19 years	48	24%
<b>2.</b>	<b>BMI</b>		
2.1	15-18	55	27.5%
2.2	19-22	111	55.5%
2.3	23-27	34	17%
<b>3.</b>	<b>Gender</b>		
3.1	Male	94	47%
3.2	Female	106	53%
<b>4.</b>	<b>Total family income per month (in Rupees)</b>		
4.1	<5,000	140	70%
4.2	5,000-10,000	36	18%
4.3	10,001-15,000	18	9%
4.4	>15,001	6	3%
<b>5.</b>	<b>Type of family</b>		
5.1	Joint Family	138	69%
5.2	Nuclear Family	47	23.5%
5.3	Single Parent	13	6.5%
5.4	Extended family	2	1%
<b>6.</b>	<b>Dietary habits</b>		

6.1	Vegetarian	162	81%
6.2	Non vegetarian	34	17%
6.3	Eggetarian	4	2%
<b>7.</b>	<b>Mother occupation</b>		
7.1	Working	84	42%
7.2	Not working	116	58%
<b>8.</b>	<b>What is your source of getting knowledge about the junk foods?</b>		
8.1	T.V	141	70.5%
8.2	Newspaper	23	11.5%
8.3	Sale representative	6	3%
8.4	Any other mass media	30	15%
<b>9.</b>	<b>Whether you have undergone any teaching program regarding effects of junk food on health?</b>		
9.1	Yes	155	77%
9.2	No	45	22.5%

The data presented in table-2 shows the level of knowledge of school going children regarding junk food. More than half (55%) school going children had very good knowledge level and 29.5% had good level of knowledge about junk food. 10.5% school going children had average level of knowledge and 5% school going children had below average level of knowledge.

**TABLE – 2**  
**Range, Frequency and Percentage Distribution of School Going Children in Term of Level of Knowledge Scores Regarding Consumption of Junk Food**

N=200			
Level of Knowledge	Range	F	%
<b>Very Good&gt;75%</b>	23-30	110	55%
<b>Good61-75%</b>	19-22	59	29.5%
<b>Average51-60%</b>	16-18	21	10.5%
<b>Below Average&lt;50%</b>	0-15	10	5%

Minimum Score: 0                      Maximum Score: 30

The data presented in table 3 shows the level of practices of school going children regarding junk food consumption. 36.5% children had unhealthy practices. 33% children had moderately healthy practice and 30.5% had healthy practices regarding junk food consumption.

**TABLE - 3**  
**Range, Frequency and Percentage Distribution of School Going Children in Term of Practice Scores Regarding Junk Food**

N=200			
Level of Practice	Range	F	%
<b>Healthy Practice</b>	>20	61	30.5%
<b>Moderately Healthy</b>	15-20	66	33%
<b>Unhealthy Practice</b>	<15	73	36.5%

Minimum Score: 0                      Maximum Score: 25

The data presented in the table-4 indicates that the, Mean 22.62 and SD± 4.24 of knowledge score and Mean18.64 and SD ±7.62 of expressed practice score and Computed correlation value 0.38 was found to be statistically not significant at 0.05 level of significance indicating no correlation between knowledge and expressed practices of School going children regarding consumption of junk food..

**TABLE - 4**  
**Table: 4 Co-relation between knowledge scores and expressed practice scores of School Going Children Regarding Consumption of Junk Food**

Group	Mean±SD	r	N = 200
<b>Knowledge score</b>	22.62±4.24	(0.38 <sup>NS</sup> )	
<b>Practice score</b>	18.64±7.62		

r = 0.38  
(p < at 0.05)\* significant                      NS= Not Significant

**DISCUSSION**

Finding of the study shows that more than half of school going children 76% were in age group of 12-15 years. More than half of children 53% were female. 18% had monthly income between 5000-10000 Rs. These findings were to be found supported by the study held in Maharashtra, India in 2015 about knowledge regarding health hazards of junk food among adolescents in which 35.65% sample belongs to age group 12-14 years, 60% were females, 31.30% family has monthly income from 5001-10,000 Rs.

Study results shows that, more than half school going children 55% had very good level of knowledge remaining 45% children have low level of knowledge regarding consumption of junk food. These findings were to be found supported by a study held in Haryana, India in 2017 about knowledge regarding the harmful effects of junk food among adolescents in which 65% adolescent had average level of knowledge and 55% had good level of knowledge.

Results indicate that 44.4% school going children preferred junk food for taste, 26.3% eats as junk food is faster to prepare, influenced by TV advertisement 70.50%, because of peer influence 66.8%. 62.6% know the harmful effects of junk food on health. These findings were to be found supported by a study held in Chitwan in 2017 in which majority of respondents 90.1% preferred junk food for taste, is faster to prepare 44.4%, influenced by TV advertisements 15.5%, because of peer influence 31.7% and 29.6% respondents preferred junk food because nothing else was available. 54.2% students were aware about the risk associated with poor eating habits.

**CONCLUSION:**

- The mean of level of knowledge score of going children (22.62) was higher than the mean of expressed practices (18.64).
- The study concluded that the half of the school going children (55.5%) having good knowledge and (36.5%) children having unhealthy practices regarding consumption of junk food.

**RECOMMENDATION**

- The study can be replicated on a larger sample of school going children in different setting for making broad generalization.
- A Non-experimental study can be conducted with health with health education regarding harmful effects of junk food.
- A study can be conducted to assess the knowledge among school teachers regarding harmful effect of junk food consumption.
- A similar study can be conducted to assess incidence and effects of excessive consumption of junk food among adolescent

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