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E: ISSN No. 2349-9435

Psychological Wellbeing and Dietary Habits among Young Adolescents

Jyoti Meena

Assistant Professor, Dept. of Home Science, University Of Rajasthan, Jaipur, Rajasthan, India

Darshan Kaur Narang

Retd. Associate Professor, Dept. of Home Science, University Of Rajasthan, Jaipur, Rajasthan, India

Abstract

The present study was aimed to assess the dietary habits and psychological wellbeing among young adolescents regarding Gender, SES and Family structures. The study was carried out on 200 adolescents derived from the universe population of 430. The age range of adolescents was16-18 years divided equally according to gender, SES (U: SES, M: SES) and family structures (JFs and NFs). The Ss were selected by systematic purposive sampling technique. Basic profile inventory and Kuppuswami's SES Scale were used to draw a final sample. A self-made standardized questionnaire was used for assessing dietary habits and psychological wellbeing of adolescents, each variable having 10 questions. Subjects werePersonally contacted for data collection. Frequency percentage, t-test and correlation coefficient were used for computing the results with SPSS software. Results found that the 'moderate modern lifestyle' in dietary habits and psychological wellbeing was most used lifestyles among adolescents belonging to Upper & Middle SES as well as JFs & NFs. Only gender wise significant difference was found in psychological wellbeing. No significant correlation was found between dietary habits and psychological wellbeing.

Keywords: Adolescent, Dietary Habits and Psychological Wellbeing. **Introduction**

Young people form precious human resources in the country. World Health Organization (WHO) defines 'adolescence' is the age of 10 to 19 years, "youth" in 15-24 years of age group. These two overlapping age groups come under the same umbrella as "young people" covering the age group of 10-24 years.

Dietary Habits

Dietary and lifestyle behaviors among adolescents are risk factors for several chronic diseases in adulthood. Musaiger and Kalam (2014) examined the differences in dietary habits and lifestyle of male and female adolescents in Syria and results indicated significant differences between males and females in the frequency of intake of vegetables, milk and dairy products, red meat, sugary beverages, and fast foods. Females were additional seemingly to skip breakfast than males (52.4% vs. 43%), but the difference was not statistically significant. Males were significantly more likely to consume larger portions of fast foods and soft drinks. Significant gender differences were found in eating while watching television, hours using the Internet, practicing physical activity and emotional eating. Conclusion.A significant variation between male and feminine Syrian adolescents in their food habits and life-style was discovered. Interventions should consider gender differences to promote a healthy lifestyle for schoolchildren in Syria.

Kukulu et al. (2010) compared the dietary habits of children living in metropolitan and non-metropolitan areas. Their physical characteristics, socio-economic milieu, and educational level were identified. Questionnaires were used to collect data regarding dietary habits of participants. Furthermore, their BMI was calculated. During the study, it was found that 4.3 percent of students living in the non-metropolitan area and 8.4 percent in the metropolitan area were found obese. A big majority of non-metropolitan students have breakfast and lunch reception. Metropolitan students usually take lunch from restaurants and school canteens and generally consume more snacks. The obesity risk of these students participating in the study was found to be high. The study highlighted the need for intervention programs to inform the students about the importance of healthy nutrition and lead them to change their current consumption behavior.

Rao and Viswanathan (2008) consider obesity as a major cause of type- 2 diabetes in children. Overweight in children and adolescents are generally caused by lack of physical activity and unhealthy eating habits and modern lifestyles.

Review of Literature

Linsay, Leyland (2008) conducted a study on Overweight status and psychological well-being in adolescent boys and girls: a multilevel analysis. their findings indicated that being overweight is associated with psychological distress in adolescent girls, but not boys. Effects don't seem to be mediate by social, lifestyle or contextual factors.

Anderson and Butcher (2006) have documented trends in children's obesity and examine the possible underlying causes of the obesity epidemic. Energy intake of children is affected by increasing availability of energy dense, high-calorie foods and drinks through schools. Changes within the family structure, particularly an increase in dual-career or single parent working families, may also have increased demand for food away from home over home-prepared foods. A host of factors also have contributed to a reduction in energy expenditure. Nowadays, youngsters appear less seemingly to steer to high school and to be traveling additional in cars than they were doing within the early Seventies, perhaps because of changes in the built-in environment. Finally, youngsters pay longer viewing tv and victimization computers.

Impact of household fast food expenditure and children's television viewing on children's dietary quality are examined by You and Nagya (2005). Results indicate that both factors have a statistically significant and negative effect. The effect of those 2 factors disagrees between youngsters younger than eleven years previous and kids a minimum of eleven years previous.

Bowman et al. (2004) examined the association between fast food consumption and measure of dietary quality. The study included 6212 children between 4 to 19 years in the United States. The study aimed to assess the hypothesis that fast food consumption adversely affects dietary factors linked to obesity risk. On a typical day, 30.3% of the total sample reported consuming fast food. Children WHO Greek deity nutriment, compared with those that failed to, consumed additional total energy, carbohydrates, additional sugars; additional sugarsweetened beverages, less milk, and fewer fruits and non-starchy vegetables. They conclude that consumption of fast food among children in the United States seems to harm dietary quality in ways that plausibly could increase the risk of obesity.

Psychological Wellbeing

Shaheen et al. (2014) researched the association between loneliness and well being among adolescents. The result showed no gender differences on any variable i.e. control of self and events, happiness, social involvement, self-esteem and mental balance except on sociability dimension of well-being. this indicates that girls were significantly higher on sociability than boys.

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Transcendental Meditation has a greater influence on Locus of control and Optimism of adolescents whereas *Upasana* has a greater influence on stress coping of adolescents (boys and girls). Findings emerged from this study reveal that meditation techniques lower distress and enhance positive psychological aspects like coping stress, life satisfaction, overall evaluation of life situation. Meditation also reduces negative effects like stress, depression, etc. (Purohit, Sharma, and Aggarwal (2010).

Yeo (2007) concluded that girls registered significantly greater worries about self and emotional distress compared to boys. however, girls reported a more positive attitude toward school, better friendship skills and stronger relationship with parents than did boys.

Lee, Shelley, Liu, & Chang (2018) conducted multinomial logistic regression models to assess association of food preferences with psychological well-being among older adults. They found that food preferences are mostly associated with psychological well-being. The older adults may consume fast food as pleasure to the palate because of westernization.

Nelek, Forestell, & Newman, (2018) examined differences in the daily experiences of vegetarians and non-vegetarians. Multilevel modeling analyses (days nested at intervals persons) found that vegetarians (individuals United Nations agency avoided all meat and fish, n = 24) reported lower selfesteem, lower psychological adjustment, less meaning in life, and more negative moods than semivegetarians (individuals who ate some meat and/or fish, n = 56) and omnivores (individuals who did not restrict their intake of meat or fish, n = 323). Vegetarians conjointly reported a lot of negative social experiences than omnivores and semi-vegetarians. The differences are consistent with other research that suggests that vegetarians are less psychologically well-adjusted than non-vegetarians.

Hence, the present study focuses on dietary habits and psychological wellbeing among young adolescents in the age group of 16-18 yrs. The study also examines difference, relationships of gender, SES and family structure, if any, that need to be addressed for the health and safety of adolescents. **Objectives of the Study**

- 1. To study the dietary habits and psychological wellbeing of adolescents (16-18 yrs).
- To assess differences, if any, in dietary habits and psychological wellbeing of adolescents based on:
- a) Gender
- b) SES
- c) Family Structure
- 3. To find out the correlation between dietary habits and psychological wellbeing among adolescents. Methods and Materials

Locale of the Study

The study was conducted in the schools of Jaipur city, located within the municipal limits. **Participants**

Total 430 Ss (N=430) were contacted from various schools in Jaipur city and the sample was

divided equally based on gender, SES and family structure. The information obtained on 'Basic profile inventory' and 'Kuppuswamy's Socio-economic Status Scale- updated by Vijaya&Ravikiran (2012), finally 200 adolescents (16-18 years) constituted the sample, which was equally divided based on a.) Gender (boys & girls), b.)SES (upper & middle) and c.)Family structure (JFs & NFs). Systematic purposive sampling technique was used to select the Ss.

Tools and Measures

The following tools were used to measure the variables under study:

Basic Profile Inventory- (Self-made [2013])

A brief profile was developed by the investigator to get information regarding name, age, sex, educational qualification, family type, siblings, birth order and occupation of mother, father of the subjects, etc.

Kuppuswamy's Socio-Economic Status Scale-Updated by Vijaya & Ravikiran (2012)

Kuppuswamy's socioeconomic status scale is an important tool to measure the socioeconomic status of families in urban areas. It was first proposed by Kuppuswamy in the year 1976. The present scale was updated by VijayaandRavikiran (2012). They attempted to revise the income groups for the year 2012. The redefine Kuppuswamy's new socioeconomic status scale whichtakes into account education, occupation and income of the family to categorize families into upper, middle and low socioeconomic status. Results

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To examine the dietary habits and psychological wellbeing of the adolescents, a questionnaire developed by the investigator herself was used. The questionnaire consisted of 20 statements in total (both dimensions has 10 items) and 3 alternative responses i.e., Always, Some time and Never. The maximum score is 60 and the minimum score is 20 for the total questionnaire. The questionnaire was divided into three categories based on scores obtained i.e. 'Highly modern lifestyle', 'moderate modern lifestyle' and 'low/tradition lifestyle'. The higher the score, the highly modern lifestyle of the Ss and vice- versa.

Procedure

Having decided upon the composition of the sample, the selected schools were contacted and permission was sought. To collect the data, rapport was established with Ss in the classrooms and standardized scales were given to them. The instructions given in the tests were explained to the Ss to enable them to understand the scale better and indicate a correct response. Several visits were made to collect the data. After the complete enumeration of the information received from the Ss, the filled questionnaires were coded into the electronic mode for the data analysis.

Statistical Analysis

All the responses of the Ss were scored strictly as prescribed in the manual. The data were analyzed statistically using a frequency- percentage, Mean, standard deviation, t-test, and correlations.

Table 1: Frequency- Percentage Profile of Dietary Habits And Psychological Wellbeing Based On Gender (boys=100 and girls= 100)

S.	Dimensions of	Gender	Highly modern	Moderate modern	Low/Traditional
No.	lifestyle		lifestyle	lifestyle	lifestyle
			f (%)	f (%)	f (%)
1	DH	Boys	4(4)	46(46)	50(50)
		Girls	5(5)	55(55)	40(40)
2 PWB		Boys	6(6)	54(54)	40(40)
	FVD	Girls	5(5)	74(74)	21(21)

The above table 1 depicts frequency -Percentage profile of boys and girls in the age group of 16-18 years on dietary habits and psychological wellbeing related lifestyles. The result shows that the majority of the adolescents fall in moderate level in both lifestyles followed by low/traditional and highly modern lifestyles. This observation is common on both boys and girls.

Table 2: Mean scores, sd and 't' Value of Boys and Girls on Dietary Habits and Psychological Wellbeing

Categories	Gender	Mean scores	sd	t-test value	
рц	Boys	16.9700	2.83718	1 729 N C	
	Girls	17.6500	2.72799	-1.720 N.S.	
	Boys	17.3200	3.22828	2 256**	
FVVD	Girls	18.3000	2.62274	-2.300	
**Oinnificent at 0.04 level of similianess. * Oinnificent at 0.05 level of similianess					

**Significant at 0.01 level of significance. * Significant at 0.05 level of significance. N.S. = Not significant

Table 2 depicts the mean score and 't' value of dietary habits and psychological wellbeing for Boys (100) & Girls (100) separately. The table shows calculated 't' value is more than tabulated 't' value (at the .01 level of significance) in the PWB, indicating a highly significant difference between boys and girls. It also indicates that girls have stronger psychological well being as compared to boys. No significant gender difference was found in dietary habits which indicates that both boys and girls have similar eating styles. The results were partially supported by Qidwai, Ishaque, Shah and Rahim (2010) who found in their study that substance abuse and other addictions were documented more in males. Females were additional depressed than males and had additional sleep issues.

SES Wise Differences in Dietary Habits and Psychological Wellbeing

The sample of the present study was also categorized according to their socio-economic status. The sample includes 100 Ss from upper SES and 100

Ss from middle SES. The following tables analyze the SES differences in dietary habits and psychological

wellbeing among young adolescents.

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 Table 3: Frequency- Percentage Profile of Dietary Habits and Psychological Wellbeing Based on SES (Upper SES = 100 and middle SES = 100)

S.	Dimensions of	SES	Highly modern	Moderate modern	Low/Traditional
NO.	lifestyle		lifestyle f (%)	lifestyle f (%)	lifestyle f (%)
1 C	DH	Upper	6(6)	48(48)	46(46)
		Middle	3(3)	53(53)	44(44)
2 PWB	Upper	4(4)	64(64)	32(32)	
	FVVD	Middle	7(7)	64(64)	29(29)

Table 3 indicates that a maximum number of adolescents have a moderate modern lifestyle in dietary habits and psychological wellbeing followed by low/tradition and highly modern lifestyle. The results also highlight that no major difference is there in moderate and low/traditional lifestyles in dietary habits as compared to psychological wellbeing between upper and middle SES group.

 Table 4: Mean Score, sd and 't' Value of Upper and Middle SES Subjects on Dietary Habits and Psychological Wellbeing

Dimensions	SES Categories	Mean score	sd	t-test value
חט	Upper	17.4000	3.091	
	Middle	17.2200	2.480	404 115
	Upper	17.7800	2.876	140 NG
PVVD	Middle	17.8400	3.08	.142 115

**Significant at 0.01 level of significance. * Significant at 0.05 level of significance. N.S. = Not significant

In the above table 4, since calculated t value was less than tabulated t value (0.01 and 0.05 level of significance) in dietary habits and psychological wellbeing. It can be said that no significant difference was found between the upper and middle SES group of adolescents. Its indicating middle and upper SES adolescents show a similar trend and inclination in the adoption of dietary habits and psychological wellbeing lifestyle patterns. Family Structure Wise Differences between Dietary Habits and Psychological Wellbeing

The sample of the present study was also categorized according to the family structures of adolescents. The sample included 100 Ss from JFs and 100 Ss from NFs. The following tables analyze the family structure wise differences in dietary habits and psychological wellbeing among young adolescents:

Table 5: Frequency- Percentage Profile of Dietary Habits and Psychological Wellbeing Based on Family Structure (JFs =100 and NFs = 100)

S. No.	Dimensions of lifestyle	Family structures	Highly modern lifestyle f (%)	Moderate modern lifestyle f (%)	Low/Traditional lifestyle f (%)
3 DH	лц	JFs	1	44	55
		NFs	0	38	62
12 PWB		JFs	2	55	43
	FVVD	NFs	1	58	41

Table 5 depicts that dietary habits related lifestyle among NFs and JFs were falling in low/traditional lifestyles followed by moderate modern and highly modern lifestyles. None of the Ss from NFs were observed in Dietary habits in highly modern lifestyle. Whereas the majority of the adolescents falling in moderate modern lifestyle related to psychological wellbeing followed by low/traditional and highly modern lifestyle.

Table 6: Mean score, sd and 't' value of JFs and NFs families on Dietary Habits and Psychological Wellbeing

Dimensions	Family Structure	Mean Score	sd	t-test value	
лц	JFs	17.43	2.6789	.389 NS	
И	NFs	17.58	2.7713		
	JFs	17.85	3.0826	671 NG	
FWD	NFs	18.13	2.8092	.071113	
**Significant at 0.01 level of significance. * Significant at 0.05 level of significance.					
N.S. = Not significant					

Table 6 depicts the mean scores and 't' values of dietary habits and psychological wellbeing for JFs (n= 100) & NFs (n=100) separately. The table shows the calculated t value is less than tabulated t value (at 0.01 level of significance). This indicated no significant family structure wise difference in dietary habits and psychological wellbeing. the table shows

that both JFs and NFs Ss have similar styles of dietary habits and psychological wellbeing.

The present study supported by the finding of Singh and Udainiya (2009) who investigated the effect of type of family on self-efficacy and well being of adolescents. Although the study did not report any significant differences that adolescents living in joint

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families showed higher well-being than adolescents living in nuclear families. Co-Relationship between Dietary Habits and Psychological Wellbeing Table 7 Co-relationship between dietary babits and psychological wellbeing

Table 7 Co-relationship between dietary habits and psychological wellbeing				
Areas of study	R-value			
Dietary habits	004			
Psychological wellbeing				

Table 7 indicates the correlation between dietary habits and psychological wellbeing lifestyles was found no significant & negative correlation. Adolescents maintain their dietary pattern and psychological wellbeing strategy separately. These are not interrelated and influenced by each other.

Cascales, Blazquez, Robledillo, Carbonell, SanSegundo& Marti (2019) evaluate the relationship between MD adherence, health-related quality of life (HRQOL) and subjective happiness. mediation analyses showed a full mediation effect of some components of HRQOL, namely, emotional wellbeing, mood and emotions, financial resources and social acceptance, in the association between MD adherence and subjective happiness.

Conclusion

The study was concluded that adolescents have the same dietary pattern whether they are belonging to the nuclear family or joint family as well as different socio-economic groups. Dietary pattern is similar in both boys and girls also. On the other hand, psychological wellbeing is maintained by adolescents with different strategies as they are living in a joint family or nuclear family but gender differences were present.

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