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**A DESCRIPTIVE STUDY TO ASSESS THE EATING HABITS AND
EXERCISE AMONG ADOLESCENTS (13-19 YEAR) IN SELECTED
SCHOOL OF VADODARA**

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ABSTRACT

Background of the study: This study shows the eating habits and exercise among the adolescents in the selected school of Vadodara. This also shows that nowadays what type of food is consumed & daily physical activity done by the adolescents. There are different ways to lead a healthy life style which includes proper balanced diet and exercise. Irregular and unhealthy eating habits may lead to various disease conditions. Descriptive study has been conducted and had found the significant and non-significant values. Aim: The main aim of the study is to assess the exercise and eating habits among adolescents (13-19 year) in selected school of Vadodara.

Material and Method: A descriptive study was conducted in assessing the eating habits and exercise among the adolescents in the selected school of Vadodara. This study consists of total 350 sample and data were collected from the selected school of Vadodara. Five-point Likert scale questionnaire was given to assess the physical assessment and food preferences of the adolescents. Here non-probability and convenience sampling had been used as the sampling technique. The statistics used here were chi-square test to find out association between the eating habits and

exercise among the adolescents and selected demographic variables.

Result: In regard to the eating habits and exercise among the adolescents, 350 samples were used for association between exercise and eating habits among adolescents and selected demographic variable tested by using chi-square test and the result of physical activity among adolescents revealed that majority 280(80%) were fairly active person, 55(15.7%) were very active person and 15(4.3%) were not doing physical activity with score range of 15-38, the Median score was 27, and Mean score was 26.91 and Standard Deviation was 3.569 and eating habits among the adolescent revealed that majority 288(82.2%) had good eating habits, 38(10.9%) had very good eating habits and only 24(6.9%) had average eating habits with score range of 108-209, the Median score was 170, and Mean score was 170.01 and Standard Deviation was 17.73.

Conclusion: The present study concluded that majority of the adolescents were having good eating habits and majority of them were fairly active person and there is association between eating habits and exercise among the adolescents and selected demographic variables.

Keywords: Eating habits, Exercise, Adolescents

INTRODUCTION

“The Food You Eat Can Be Either The Safest And Most Powerful Form Medicine Or The Slowest Form Of Poison” ~Ann Wigmore [1]

The word eating habits or food habits refers to why what and how people eat and also the diet schedule of an individual [2]. A habit involving the regular consumption of certain types of food [3]. A balanced diet *al* so involves exercise as it is an important part of healthy life style. A balanced life style increases the quality of life not only physical health but also promotes mental health. Adolescence is a of significant development begins with the onset of puberty and ends in the mid-20's [4]. It is the unique stage of

human development and an important time for laying the foundation of good health. In this period adolescents' experiences rapid physical, cognitive and psychosocial growth [5]. Adolescents establish patterns of behavior and make lifestyle choices that affect their future health during their transition from childhood to adulthood. They struggle with behaviors, such as physical activity and nutrition, which will affect their risk of developing chronic diseases in adulthood [6]. Adolescents mostly engage in unhealthy eating habits, lack of exercise and also irregular sleeping pattern which leads to obesity, hypertension, diabetes, malnutrition and other serious diseases thus would be a problem during their late adolescents period

[7]. Factors influencing food choices includes hunger and food cravings, appeal of food, time consideration of adolescent and parental influences on eating behavior if includes the culture and religion of family [8]. Major determinants of food choices include;

- Biological determinants such as hunger, appetite and taste.
- Economic determinants such as cost, income, availability.
- Physical determinants such as culture, family, peers and meal patterns.
- Psychological determinants such as mood, stress and guilt.
- Attitudes, beliefs and knowledge about food [9].

Unhealthy eating habits can affect our nutrition intake including energy, protein, carbohydrate, essential fatty acids, vitamins and minerals as well as fibers and fluids. Poor nutrition can impair our daily health and wellbeing and reduce our ability to lead an enjoyable and active life. In the short term, poor nutrition can contribute to stress, tiredness and our capacity to work, and over time, also it affects cognitive function like logical thinking, abstraction, learning, and memory and reasoning skills, also it can contribute to risk of developing some illness and other health problems. Such as overweight, tooth decay, high cholesterol,

type-2 diabetes, osteoporosis, some cancers, depression, and tiredness [10].

Disturbance in eating habits leads to eating disorder which includes anorexia nervosa and bulimia nervosa. Anorexia nervosa and bulimia nervosa are serious psychiatry illness related to disorder of eating and distorted body images. They both have significant medical complications associated with the weight loss and malnutrition of anorexia nervosa, as well as form the purging behaviors that characterized bulimia nervosa [11].

Unhealthy diet contributes to approximately 678,000 each year in the US due to nutrition and obesity related diseases, such as heart diseases, cancer, type 2 diabetes. In the last 30 years obesity rates have doubled in adults, tripled in children, and quadrupled in adolescents [12]. In 2017, 11 million (95% uncertainly interval 10-12) deaths and 255 million (237-274) DALYs (disability adjusted life year) were attributed to dietary risk factor. High intake of sodium (3 million [2-4] deaths and 82 million [59-109]), and low intake fruits (2 million [1-4] deaths and 65 million [41-92] DALYs were the leading dietary risk factors for deaths and DALYs globally and in many countries [13].

A cross sectional study to conducted by soumitra Kumar *et al.*, January-June 2014, in which 1755 students of 9th grade were

through clusters (schools) random sampling. Informed consents from parents and assents from adolescents were collected. Information on socio demographic s, CVD-related knowledge and perception along with eating and exercise patterns were collected with an internally validated structured questionnaire. Among 1652 participants (response rate=94.1%), about 44% had poor overall knowledge about CVD. CVD-related knowledge as well as eating and exercise habits were quite poor among adolescents' school-students of Kolkata. Additionally, there was a large knowledge-practice gap [14]. Another research conducted by David thivel *et al.*, in which 278 French school children (131 boys and 147 girls) filled in eating habit questionnaires and completed anthropometric measurement (weight, height, skinfolds) and physical fitness tests. The 20-m shuttle run test and the squat jump test were used to assess aerobic fitness and anaerobic (lower limb muscle power) fitness respectively. Breakfast consumption was associated with both aerobic fitness ($p<0.05$) and lower limb muscle power ($p<0.01$) while snacking was negatively related to squat jump performance ($p<0.05$). There was no association between physical fitness and either the type of the consumed-beverages or TV watching during dinner and lunch meals.

Cumulated unhealthy eating habits was negatively associated with CRF stages and lower limb muscle power performances ($p<0.05$). French primary school children physical fitness is associated with their eating habits and decreases with the number of unhealthy eating behaviors cumulated [15].

METHOD AND METHODOLOGY

A quantitative research study was carried out on 350 adolescents to assess the eating habits and exercise among adolescent in selected school of Vadodara. Here we are going to standardized tool for assessing eating habits and exercise. The tool used for the present study is five-Likert scale. For the study the obtained data will be analyses by using descriptive and inferential statistics. The data was collected after getting formal permission from the principal of Avalon world School and Ambe Vidyalaya School of Vadodara. The objectives of this study were explained to the participants and their written consent was taken. The sampling technique used for this study was non-probability convenience sampling technique for 350 adolescents' students. Self structured questions and Likert scale used to assess eating habits and exercise related knowledge and behavior. Ethical approval for conducting the study was taken form Sumandeeep Vidyapeeth Institutional ethics committee, Vadodara. Permission was

taken from concern authorities of the selected school, Vadodara. The consent forms were prepared for the study participant regarding their willingness to participate in the research study. The research tool for data collection consists three sections: Section 1: It consists of socio-demographic variables of the participant such as age, religion, type of family, school performance, monthly family income, parent's education, residential area, parent's occupation, food preference, allergy food category. Section 2: It includes weekly physical activity self-assessment questionnaire. After answering all the questions, put the score for each question (1-5). In this section categorized students according to total score if score is less than 18 profile of person who doesn't do much physical activity, if score is between 18 to 35 person profile of a person is fairly active person, if score is greater than 35 profile of person is a very active in physical activity. Section 3: It includes five-point Likert scale to check the eating behavior of the adolescence. The food preference questionnaire requires participants to rate their liking of 47 individual foods on 5-point Likert scale, ranging from "not at all" to "a lot".

RESULT

Table 1 depicts the frequency and percentage distribution of demographic variables of

adolescent. According to their age majority 102(29.1%) were in 13-14 years of age, 100(28.6%) were in 15-16 years of age, 96(27.4%) were in 17-18 years of age and 52(14.9%) were in 19 years and above.

Regarding religion of adolescent, maximum 343(98%) belongs to Hindu and 7(2%) belongs to Christian.

As per school performance of adolescent, majority 338(96.5%) had good performance, 9(2.6%) had excellent performance, 2(0.6%) had average performance and 1(0.3%) had poor performance in school.

With regard to type of family of adolescent, maximum 334(98.3%) were living in nuclear family and 6(1.7%) were living in joint family.

According to monthly family income of adolescent, maximum 345(98.5%) had income of above Rs 30,000, 3(0.9%) had Rs 20,001-30,000, 1(0.3%) had Rs 10,001-20,000 and 1(0.3%) had less than 10,000.

As per residential area of adolescent, majority 348(99.4%) were residing in urban area and 2(0.6%) were residing in rural area.

Regarding parents' education, maximum 343(98%) were graduation and above, 5(1.4%) had high secondary, 1(0.3%) had secondary education and 1(0.3%) had primary education.

With regard to parents' occupation, majority

339(96.8%) were agriculture, 7(2%) were in other job, 2(0.6%) were unemployed, 1(0.3%) were labor and 1(0.3%) were doing business. According to identify any of the following, maximum 211(60.3%) were vegetarian, 98(28% were non vegetarian, 23(6.6%) were eggetarian and 18(5.1%) were vegan.

As per any allergic to following food items, majority 90(25.7%) were allergic to fish, 61(17.4%) were allergic to tree nuts, 65(18.6%) were allergic to egg, 21(6%) were allergic to celery, 16(4.6%) were allergic to dairy, 15(4.3%) were allergic to mustard, 10(2.9%) were allergic to wheat/gluten, 6(1.7%) were allergic to peanuts and 4(1.1%) were allergic to soya.

Table 2 describes the distribution exercise habits among the adolescent revealed that majority 280(80%) were fairly active person, 55(15.7%) were very active person and 15(4.3%) were not doing physical activity with score range of 15-38, the Median score was 27, and Mean score was 26.91 and Standard Deviation was 3.569.

Table 3 describes the distribution eating habits among the adolescent revealed that majority 288(82.2%) had good eating habits, 38(10.9%) had very good eating habits and only 24(6.9%) had average eating habits with score range of 0 10 20 30 40 50 60 70 80 No physical activity Fairly active person Very

active person 4.3 80 15.7 PERCENTAGE EXERCISE HABITS AMONG THE ADOLESCENT 108-209, the Median score was 170, and Mean score was 170.01 and Standard Deviation was 17.73.

Table 4 depicts the food preference of adolescent. According to food preference on vegetables highest preference was potatoes (4.34), followed by lady finger (4.32), carrots (4.31), cabbage (4.31), cucumber (4.30), sweet corn (4.29), peas (4.12), sponge guard (4.07), cauliflower (3.79), sprouts (3.78), green beans (3.71), green onion (3.71), capsicum (3.70), beetroot (3.69) < spinach (3.62), teasel guard (3.09), bitter guard (3.04) and least favorite vegetable preferred was mushrooms (1.97). According to food preference on fruits majority likes mango (4.57), grapes (4.34), strawberries (4.31), pomegranate (4.29), oranges (4.24), apples (4.21) and watermelon (3.71) As per food preference on meat/ fish, maximum likes chicken (2.28) and least liked fish (1.96). As per food preference dairy, maximum likes ghee (4.34), cottage cheese (4.33), cheese (4.32), milk (4.32), butter (4.24) and least liked yogurt (3.04). With regard to food preference on snacks, maximum (sugared cereal (4.32), fried snacks (4.31), sugar cotted sweets (4.24), steam snack (3.86) and chocolate (3.72). According to food

preference on carbohydrates, most liked rice or corn cereal (4.32), chips (4.32), biscuits (4.32), bread (4.11), porridge (3.72), rice (3.72), wheat cereal (3.60) and oats cereal (3.02). Regarding food preference on egg mean was 2.32.

Table 5 depicts the association between exercise habits among the adolescent and selected demographic variables which was tested by using chi-square test. Result revealed that demographic variables such as school performance and residential area, parents' education and occupation were found significant association at $p < 0.05$ but age, religion, type of family, monthly family income, identify any of following and any

allergy to food items were found non-significant with exercise habits among the adolescent.

Table 6 depicts the association between eating habits among the adolescent and selected demographic variables which was tested by using chi-square test. Result revealed that demographic variables such as identify any of following and any allergy to food items were found significant association at $p < 0.05$ but age, religion, type of family, school performance, residential area, monthly family income, parents' education and parents' occupation were found non-significant with eating habits among the adolescent.

SECTION - I

Table 1: Frequency and Percentage Distribution of Demographic Variables (N=350)

S. No	Demographic Variables	frequency	percentage
1	Age in years		
	a. 13-14 years	102	29.1
	b. 15-16 years	100	28.6
	c. 17-18 years	96	27.4
	d. 19 years and above	52	14.9
2	Religion		
	a. Hindu	343	98
	b. Muslim	0	0
	c. Christian	7	2
3	School Performance		
	a. Excellent	9	2.6
	b. Good	338	96.5
	c. Average	2	0.6
	d. Poor	1	0.3
4	Type of family		
	a. Joint family	6	1.7
	b. Nuclear family	334	98.3
5	Monthly family income		
	a. < 10,000	1	0.3
	b. 10,001-20,000	1	0.3
	c. 20,001-30,000	3	0.9
	d. Above 30,000	345	98.5
6	Residential area		
	a. Rura	2	0.6
	b. Urban	348	99.4
7	Parents education		
	a. Illiterate	0	0

	b. Primary	1	0.3
	c. Secondary	1	0.3
	d. High secondary	5	1.4
	e. Graduation and above	343	98
8	Parents occupation		
	a. Unemployed	2	0.6
	b. Labour	1	0.3
	c. Agriculture	339	96.8
	d. Business	1	0.3
	e. Any other	7	2
9	Do you identify as any of the following?		
	a. Vegan	18	5.1
	b. Vegetarian	211	60.3
	c. Eggetarian	23	6.6
	d. Non vegetarian	98	28
10	Are you allergic to any of the following food items?		
	a. Peanuts	6	1.7
	b. Tree nuts	61	17.4
	c. Dairy	16	4.6
	d. Fish	90	25.7
	e. Egg	65	18.6
	f. Wheat/gluten	10	2.9
	g. Soya	4	1.1
	h. Celery	21	6
	i. Mustard	15	4.3

SECTION - II

Table 2: Distribution of exercise habits among the adolescent (N=350)

Exercise habits	f	%	Score range	Median	MEAN	SD
No physical activity	15	4.3	15-38 23	27	26.91	3.569
Fairly active person	280	80				
Very active person	55	15.7				

Table 3: Distribution of eating habits among the adolescent (N=350)

Eating habits	f	%	Score range	Median	MEAN	SD
Poor	0	0	108-209	170	170.01	17.73
Fair	0	0				
Average	24	6.9				
Good	288	82.2				
Very good	38	10.9				

Table 4: Distribution of food preference of the adolescent (N=350)

Sr no.	Food item	Mean	SD	Food preference frequency					
				Dislike a lot	Dislike a little	Neither like or dislike	Like a little	Like a lot	Not applicable
	Vegetables			1	2	3	4	5	0
1	Spinach	3.62	1.66	40	64	71	60	44	71
2	Carrots	4.31	1.06	6	27	38	65	209	5
3	Green beans	3.71	1.09	27	25	24	228	36	10
4	Cucumber	4.30	1.12	16	19	25	78	206	6
5	Mushrooms	1.97	1.55	222	31	41	23	6	27
6	Sprouts	3.78	1.00	14	30	36	220	37	13
7	Peas	4.12	1.15	13	31	32	109	154	11
8	Sweet corn	4.29	1.12	8	33	31	60	212	6
9	Bitter gourd	3.04	1.15	43	34	193	35	36	9
10	Teasel gourd	3.09	1.20	42	33	189	35	37	14
11	Potatoes	4.34	1.08	6	26	37	65	203	13
12	Sponge gourd	4.07	1.16	13	34	34	111	149	9

13	Beetroot	3.69	1.10	27	25	33	218	36	11
14	lady fingers	4.32	1.08	6	27	38	71	194	14
15	Capsicum	3.70	1.10	27	24	36	215	36	12
16	Cabbage	4.31	1.09	6	27	39	71	193	14
17	Cauliflower	3.79	1.00	14	29	36	220	38	13
18	Green onion	3.71	1.09	27	25	24	228	36	10
	Fruits								
19	Oranges	4.24	1.16	17	20	41	58	211	3
20	Grapes	4.34	1.08	6	26	37	65	203	13
21	Apples	4.21	1.17	17	20	41	76	186	10
22	Watermelon	3.71	1.09	27	25	24	228	36	10
23	Strawberries	4.31	1.06	6	27	38	65	209	5
24	Mango	4.57	1.02	12	16	15	30	270	7
25	Pomegranate	4.29	1.12	8	33	31	60	212	6
	Meat/ Fish								
26	Chicken	2.28	1.76	197	37	36	13	34	33
27	Fish	1.96	1.53	223	31	41	23	6	26
	Dairy								
28	Cheese	4.32	1.14	8	33	30	59	207	13
29	Ghee	4.34	1.08	6	26	37	65	203	13
30	Milk	4.32	1.14	8	33	30	59	208	12
31	Butter	4.24	1.17	16	19	41	75	185	14
32	Yogurt	3.04	1.19	44	34	193	33	32	14
33	Cottage cheese	4.33	1.16	9	32	30	58	203	18
	Snacks								
34	Fried snacks	4.31	1.10	7	27	36	76	187	17
35	Steam snack	3.86	1.11	16	29	35	203	42	25
36	Chocolate	3.72	1.14	29	27	24	213	45	12
37	Sugar cotted sweets	4.24	1.15	19	16	37	67	209	2
38	Sugared cereal	4.32	1.18	11	32	24	70	191	22
	Carbohydrates								
39	Bread	4.11	1.14	13	31	33	109	155	9
40	Oats cereal	3.02	1.16	44	34	195	32	35	10
41	Porridge	3.72	1.10	27	25	25	225	35	13
42	Rice	3.72	1.07	26	25	26	226	38	9
43	Wheat cereal	3.60	1.65	40	65	71	60	44	70
44	Rice or corn cereal	4.32	1.13	8	32	30	60	208	12
45	Chips	4.32	1.13	8	32	31	60	206	13
46	Biscuits	4.32	1.11	7	31	32	64	204	12
	Egg								
47	Egg	2.32	1.79	195	37	35	13	34	36

SECTION - III

Table 5: Association between exercise habits among the adolescent and selected demographic variables (N=350)

S. No	Demographic Variables	Exercise habits			χ ² value	df	p value
		Average	Good	Very good			
1	Age in years				1.849	6	0.933 ^{NS}
	a. 13-14 years	4	83	15			
	b. 15-16 years	4	83	13			
	c. 17-18 years	4	75	17			
	d. 19 years and above	3	39	10			
2	Religion				2.885	2	0.236 ^{NS}
	a. Hindu	14	276	53			
	b. Muslim	--	--	--			
	c. Christian	1	4	2			
3	School Performance				17.93	6	0.006*
	a. Excellent	0	9	0			
	b. Good	14	270	54			
	c. Average	1	1	0			

	d. Poor	0	0	1			
4	Type of family						
	a. Joint family	1	5	0	3.151	2	0.207^{NS}
	b. Nuclear family	14	275	55			
5	Monthly family income						
	a. < 10,000	0	1	0	11.09	6	0.196^{NS}
	b. 10,001-20,000	0	1	0			
	c. 20,001-30,000	1	2	0			
	d. Above 30,000	14	276	55			
6	Residential area						
	a. Rura	1	1	0	10.35	2	0.006*
	b. Urban	14	279	55			
7	Parents education						
	a. Illiterate	--	--	--	22.89	6	0.001*
	b. Primary	0	1	0			
	c. Secondary	1	0	0			
	d. High secondary	0	4	1			
	e. Graduation and above	14	275	54			
8	Parents occupation						
	a. Unemployed	0	2	0	24.91	8	0.002*
	b. Labour	1	0	0			
	c. Agriculture	14	270	55			
	d. Business	0	1	0			
	e. Any other	0	7	0			
9	Do you identify as any of the following?						
	a. Vegan	2	12	4	4.212	6	0.648^{NS}
	b. Vegetarian	9	172	30			
	c. Eggetarian	1	17	5			
	d. Non vegetarian	3	79	16			
10	Are you allergic to any of the following food items?						
	a. Peanuts	0	5	1	16.11	20	0.709^{NS}
	b. Tree nuts	2	51	8			
	c. Dairy	1	11	4			
	d. Fish	4	68	18			
	e. Egg	3	54	8			
	f. Wheat/gluten	0	10	0			
	g. Soya	0	4	0			
	h. Celery	0	18	3			
	i. Mustard	0	10	5			

*p value < 0.05 level of significance; NS-Non-Significant

Table 6: Association between eating habits among the adolescent and selected demographic variables (N=350)

S. No	Demographic variables	Eating habits			χ ² value	df	p value
		Fair	Average	Good			
1	Age in years						
	a. 13-14 years	7	84	11	1.085	6	0.982^{NS}
	b. 15-16 years	7	82	11			
	c. 17-18 years	8	78	10			
	d. 19 years and above	2	44	6			
2	Religion						
	a. Hindu	23	282	38	1.361	2	0.506^{NS}
	b. Muslim	--	--	--			
	c. Christian	1	6	0			
3	School Performance						
	a. Excellent	1	8	0	1.960	6	0.923^{NS}
	b. Good	23	277	38			
	c. Average	0	2	0			
	d. Poor	0	1	0			
4	Type of family						

	a. Joint family	0	6	0	1.314	2	0.518 ^{NS}
	b. Nuclear family	24	282	38			
5	Monthly family income				1.092	8	0.998 ^{NS}
	a. < 10,000	0	1	0			
	b. 10,001-20,000	0	1	0			
	c. 20,001-30,000	0	2	0			
	d. Above 30,000	24	283	38			
		0	1	0			
6	Residential area				0.433	2	0.805 ^{NS}
	a. Rural	0	2	0			
	b. Urban	24	286	38			
7	Parents education				1.538	6	0.957 ^{NS}
	a. Illiterate	--	--	--			
	b. Primary	0	1	0			
	c. Secondary	0	1	0			
	d. High secondary	0	5	0			
	e. Graduation and above	24	281	38			
8	Parents occupation				7.769	8	0.456 ^{NS}
	a. Unemployed	1	1	0			
	b. Labour	0	1	0			
	c. Agriculture	22	279	38			
	d. Business	0	1	0			
	e. Any other	1	6	0			
9	Do you identify as any of the following?				10.188	6	0.012 ^{NS}
	a. Vegan	3	15	0			
	b. Vegetarian	14	174	23			
	c. Eggetarian	2	17	4			
	d. Non vegetarian	5	82	11			
10	Are you allergic to any of the following food items?				20.60	20	0.021 ^{NS}
	a. Peanuts	1	3	2			
	b. Tree nuts	5	51	5			
	c. Dairy	3	10	3			
	d. Fish	4	77	9			
	e. Egg	5	51	9			
	f. Wheat/gluten	1	7	2			
	g. Soya	0	4	0			
	h. Celery	0	17	4			
	i. Mustard	2	12	1			

*p value < 0.05 level of significance; NS-Non-Significant

DISCUSSION:

This chapter deals with the discussion in accordance with the objectives of the study and hypothesis. The statement of the problem was “A descriptive study to assess the eating habits and exercise among adolescents in selected school of Vadodara” The main objectives of the study to assess the eating habits among adolescence and find out the

association between selected demographic variables and exercise and eating habits among adolescence. In the present study, with regards to age of adolescent, it has been found that depicts the frequency and percentage distribution of demographic variables of adolescent. According to their age majority 102(29.1%) were in 13-14 years of age, 100(28.6%) were in 15-16 years of age,

96(27.4%) were in 17-18 years of age and 52(14.9%) were in 19 years and above. With regards that religion of adolescent, maximum 343(98%) belongs to Hindu and 7(2%) belongs to Christian. With regards as per school performance of adolescent, majority 338(96.5%) had good performance, 9(2.6%) had excellent performance, 2(0.6%) had average performance and 1(0.3%) had poor performance in school. With regard to type of family of adolescent, maximum 334(98.3%) were living in nuclear family and 6(1.7%) were living in joint family. With regard to monthly family income of adolescent, maximum 345(98.5%) had income of above Rs 30,000, 3(0.9%) had Rs 20,001-30,000, 1(0.3%) had Rs 10,001-20,000 and 1(0.3%) had less than 10,000. With regard to residential area of adolescent, majority 348(99.4%) were residing in urban area and 2(0.6%) were residing in rural area. With regard to parents' education, maximum 343(98%) were graduation and above, 5(1.4%) had high secondary, 1(0.3%) had secondary education and 1(0.3%) had primary education. With regard to parents' occupation, majority 339(96.8%) were agriculture, 7(2%) were in other job, 2(0.6%) were unemployed, 1(0.3%) were labour and 1(0.3%) were doing

CONCLUSION

The present study concluded that majority of

business. With regard to food category of adolescent, maximum 211(60.3%) were vegetarian, 98(28%) were non vegetarian, 23(6.6%) were eggetarian and 18(5.1%) were vegan. With regard to allergic food items of adolescent, majority 90(25.7%) were allergic to fish, 61(17.4%) were allergic to tree nuts, 65(18.6%) were allergic to egg, 21(6%) were allergic to celery, 16(4.6%) were allergic to dairy, 15(4.3%) were allergic to mustard, 10(2.9%) were allergic to wheat/gluten, 6(1.7%) were allergic to peanuts and 4(1.1%) were allergic to soya. In the present study, describes the distribution exercise habits among the adolescent revealed that majority 280(80%) were fairly active person, 55(15.7%) were very active person and 15(4.3%) were not doing physical activity with score range of 15-38, the Median score was 27, and Mean score was 26.91 and Standard Deviation was 3.569 and the distribution eating habits among the adolescent revealed that majority 288(82.2%) had good eating habits, 38(10.9%) had very good eating habits and only 24(6.9%) had average eating habits with score range of 108-209, the Median score was 170, and Mean score was 170.01 and Standard Deviation was 17.73.

the adolescents were having good eating habits and majority of them were fairly active

person and there is association between eating habits and exercise among the adolescents and selected demographic variables. According to assess the exercise among adolescence majority (80%) of the students are fairly active person and (4.3%) of the students not doing physical activity. According to assess the eating habits adolescence majority (82.2%) of the students are good eating habits and (6.9%) of the students average eating habits.

CONSENT:

As per international standard or university standard, student written consent has been collected and preserved by the Author(S).

ETHICAL APRUVAL

The study was approved from ethical committee of sumandeeep Vidyapeeth institutional ethical committee and ethical approval number is SVIEC/ON/NURS/SRP/OCT/22/16

REFERANCE

- [1]A quote by Ann Wigmore. Goodreads. Goodreads; [cited 2022Jul8]. Available from:<https://www.goodreads.com/quotes/563016-the-food-you-eat-can-be-either-the-safest-and>.
- [2]nutrition and well-being A to Z. encyclopedia.com. 21 Jun. 2022. Encyclopedia.com. Encyclopedia.com; 2022 [cited 2022Jul8]. Available from: [https://www.encyclopedia.com/food/news-wires-white-papers-and-books/eating-habits#:~:text=The%20term%20eating%20habits%20\(or,all%20influence%20people's%20eating%20habits](https://www.encyclopedia.com/food/news-wires-white-papers-and-books/eating-habits#:~:text=The%20term%20eating%20habits%20(or,all%20influence%20people's%20eating%20habits).
- [3]Your dictionary. Your Dictionary. [cited 2022Jul8]. Available from: <https://www.yourdictionary.com/>.
- [4]Adolescent development - the promise of adolescence - NCBI Bookshelf. [cited 2022Jul8]. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK545476/>.
- [5]Adolescent health. World Health Organization. World Health Organization; [cited 2022Jul8]. Available from: <https://www.who.int/health-topics/adolescent-health>.
- [6]N; HCMCP. The Adolescent Lifestyle Profile: Development and psychometric characteristics. Journal of National Black Nurses' Association : JNBNA. U.S. National Library of Medicine; [cited 2022Jul8]. Available from: <https://pubmed.ncbi.nlm.nih.gov/17410753/>.
- [7]NI; MPMJS. Eating habits and sleep patterns of adolescents with depression symptoms in Mumbai, India. Maternal & child nutrition. U.S. National Library of Medicine; [cited 2022Jul8]. Available from: <https://pubmed.ncbi.nlm.nih.gov/33347724/>.
- [8]MA; N-SDSMPCC. Factors influencing food choices of adolescents: Findings from Focus-group discussions with adolescents. Journal of the American Dietetic Association. U.S. National Library of Medicine; [cited 2022Jul8]. Available from:

- [https://pubmed.ncbi.nlm.nih.gov/10450307/#:~:text=Results%3A%20Factors%20perceived%20as%20influencing,benefits%20of%20foods%20\(including%20health\).](https://pubmed.ncbi.nlm.nih.gov/10450307/#:~:text=Results%3A%20Factors%20perceived%20as%20influencing,benefits%20of%20foods%20(including%20health).)
- [9] The factors that influence our food choices. Eufic. [cited 2022Jul8]. Available from: <https://www.eufic.org/en/healthy-living/article/the-determinants-of-food-choice>.
- [10] PS; WPKMJM. Medical complications of anorexia nervosa and bulimia. The American journal of medicine. U.S. National Library of Medicine; [cited 2022Jul8]. Available from: <https://pubmed.ncbi.nlm.nih.gov/26169883/>.
- [11] S; MJEC. Medical complications of anorexia nervosa and bulimia nervosa. Current opinion in psychiatry. U.S. National Library of Medicine; [cited 2022Jul12]. Available from: <https://pubmed.ncbi.nlm.nih.gov/16721178/>.
- [12] Why good nutrition is important. Center for Science in the Public Interest. 2018 [cited 2022Jul8]. Available from:
- <https://www.cspinet.org/eating-healthy/why-good-nutrition-important>.
- [13] The lancet the best science for better lives. [cited 2022Jul8]. Available from: [https://www.thelancet.com/article/S0140-6736\(19\)30041-8/fulltext](https://www.thelancet.com/article/S0140-6736(19)30041-8/fulltext).
- [14] Kumar S; Ray S; Roy D; Ganguly K; Dutta S; Mahapatra T; Mahapatra S; Gupta K; Chakraborty K; Das MK; Guha S; Deb PK; Banerjee AK; Exercise and eating habits among urban adolescents: A cross-sectional study in Kolkata, India. BMC public health. U.S. National Library of Medicine; [cited 2022Jul12]. Available from: <https://pubmed.ncbi.nlm.nih.gov/28521735/>.
- [15] Thivel D; Aucouturier J; Isacco L; Lazaar N; Ratel S; Doré E; Meyer M; Duché P; Are eating habits associated with physical fitness in primary school children?. Eating behaviors. U.S. National Library of Medicine; [cited 2022Jul12]. Available from: <https://pubmed.ncbi.nlm.nih.gov/23265408/>