

Research Article

A Descriptive Study to Assess the Knowledge Related Importance of Healthy Food Habits among Teenagers in selected Schools of Pampore

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ABSTRACT

Background: Adolescence is a critical period for developing lifelong health behaviors, including dietary habits. With the growing prevalence of non-communicable diseases linked to poor nutrition, there is an urgent need to assess and strengthen teenagers' understanding of healthy food habits. This study was conducted to evaluate the knowledge of healthy dietary practices among teenagers in selected schools of Pampore, Jammu and Kashmir.

Aim: To assess the level of knowledge related to the importance of healthy food habits among teenagers and to identify associations between knowledge levels and selected demographic variables.

Materials and Methods: A quantitative descriptive research design was adopted. The study included 60 students from 9th and 10th grades, selected using purposive sampling. Data were collected using a self-structured, validated questionnaire. Descriptive statistics (frequency, percentage, mean, standard deviation) and inferential statistics (Chisquare test) were analyzed using SPSS version 26. A significance level of p < 0.05 was considered statistically significant.

Results: The study revealed that 85% of teenagers had moderately adequate knowledge, while 15% had adequate knowledge regarding healthy food habits. No participants demonstrated inadequate knowledge. A statistically significant association was observed between knowledge level and parental education (p < 0.05), whereas variables such as age and gender showed no significant association.

Conclusion: The findings suggest that while most teenagers possess a basic understanding of healthy eating, targeted nutrition education programs are essential to deepen their knowledge and influence behavior positively. The role of parental education is particularly critical and should be integrated into community- based interventions to promote healthier lifestyle choices among adolescents.

Keywords: Healthy food habits, Teenagers, Nutritional awareness, Descriptive study, Pampore schools

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Introduction

Adolescence is a dynamic and transitional stage of life that significantly influences long-term health and well- being. It is during this period that individuals develop dietary patterns that often persist into adulthood. The adoption of healthy food habits during adolescence plays a pivotal role in ensuring optimal growth, cognitive development, disease prevention, and psychological stability. However, with the rise of fast food culture, sedentary lifestyles, and widespread consumption of nutrient-poor diets, teenagers today are increasingly

exposed to unhealthy eating behaviors that contribute to a growing burden of non-communicable diseases (NCDs), including obesity, diabetes, hypertension, and cardiovascular conditions.

Globally, poor dietary habits among youth have become a public health concern. According to the World Health Organization (WHO), unhealthy eating is one of the leading behavioral risk factors for major health issues in adolescents. In the Indian context, this problem is exacerbated by limited awareness, socio-economic disparities, and lack of structured nutritional education at the school level. Jammu & Kashmir, like many other regions, faces similar challenges where adolescents are often unaware of balanced dietary requirements and the health implications of poor food choices.

The town of Pampore, situated in the Pulwama district of Jammu and Kashmir, is home to a diverse population of school-going adolescents. However, limited regional studies have been conducted to assess teenagers' knowledge regarding healthy food practices in this area. Understanding their current level of awareness is essential to designing targeted interventions that promote healthy eating habits and prevent future health complications.

Therefore, this study was designed with the objective of assessing the knowledge related to the importance of healthy food habits among teenagers in selected schools of Pampore, and to evaluate the relationship between their knowledge levels and demographic variables such as age, gender, and parental education. The findings from this research are expected to contribute valuable insights for healthcare providers, educators, and policymakers in planning school-based nutritional education and community health initiatives.

Need of the Study

The dietary habits established during adolescence lay the foundation for an individual's long-term health trajectory. In recent years, there has been a noticeable shift in the eating patterns of teenagers, marked by increased consumption of processed foods, sugary beverages, and fast foods—contributing significantly to nutritional imbalances

and the early onset of lifestyle diseases. According to the World Health Organization (WHO), nearly 80% of premature heart disease, type 2 diabetes, and strokes are preventable through proper diet and regular physical activity.

In India, the rising prevalence of obesity, hypertension, and non-communicable diseases (NCDs) among young populations is closely linked to poor food choices and a lack of nutritional awareness. Despite various national health programs, nutritional education remains inadequately integrated into school curriculums, especially in semi-urban and rural areas.

The teenagers in Pampore, a semi-urban region in Jammu and Kashmir, represent a demographic that is both vulnerable and underserved in terms of structured health education. With cultural, social, and economic factors influencing dietary behavior, there exists a significant gap in knowledge regarding balanced nutrition among adolescents in this region.

Hence, there is a critical need to assess the current level of knowledge related to healthy food habits among teenagers in Pampore. Identifying this knowledge gap will help in planning targeted awareness programs, school-based interventions, and community outreach to foster healthier generations and reduce the future burden on the healthcare system.

Methodology

This research adopted a quantitative descriptive survey design to assess the level of knowledge regarding the importance of healthy food habits among teenagers in selected schools of Pampore, Jammu and Kashmir. The descriptive nature of the study was chosen to systematically observe, describe, and interpret the knowledge levels without manipulating any variables, making it appropriate for the objectives of this investigation.

The study was conducted in selected secondary schools in Pampore, specifically targeting students from 9th and 10th standards. These students were considered ideal for the study due to their developmental stage and the potential impact of nutritional knowledge on their lifestyle. The total sample consisted of 60 students, selected through a purposive sampling technique, ensuring that only those who met the inclusion criteria were considered. The inclusion criteria comprised students enrolled in 9th or 10th standard, capable of understanding English, and willing to participate in the study. Students who were absent at the time of data collection or did not fall within the defined adolescent age group were excluded.

A self-structured, validated questionnaire served as the primary data collection tool. The tool was divided into two sections: Section A collected demographic data such as age, gender, parental education, and occupation, while Section

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B contained 20 items designed to assess knowledge related to healthy food habits. The questionnaire was developed based on existing literature and validated by subject matter experts to ensure content relevance and clarity.

To ensure reliability and feasibility, a pilot study was conducted in February 2023 on a small sample. The feedback obtained from this pilot was used to refine and finalize the tool for the main study. Ethical clearance was obtained from the relevant institutional ethics committee, and formal permission was secured from the school authorities. All participants were informed about the purpose of the study, and written consent was obtained, ensuring confidentiality and voluntary participation throughout the research process.

Data collected were coded and entered into SPSS version 26 for statistical analysis. Descriptive statistics, including frequency, percentage, mean, median, standard deviation, and range, were used to summarize the results. In addition, inferential statistics such as the Chi-square test were applied to examine the association between knowledge levels and selected demographic variables. A p-value of less than 0.05 was considered statistically significant.

Analysis and Interpretation

The collected data from 60 teenage students were systematically analyzed using SPSS version 26. Both descriptive and inferential statistics were applied to interpret the findings related to teenagers' knowledge of healthy food habits and to examine relationships with selected demographic variables.

The demographic analysis revealed that the majority of participants (33.33%) were aged between 17 and 18 years, followed by 31.67% in the 15 to 16-year age group, and 28.33% in the 13 to 14-year age group. Only 6.67% of the participants were between 19 and 20 years. In terms of gender distribution, 55% were female and 45% were male, showing a balanced representation with a slight female majority.

Regarding parental education, the highest proportion of teenagers (60%) had parents with only primary-level education, followed by 31.67% whose parents had no formal education, and 8.33% whose parents had education up to the middle level. This highlights a generally low level of parental educational attainment in the selected population. Professionally, the majority of fathers (40%) were businessmen, 25% were government employees, 20% were farmers, and 15% were employed in the private sector.

In evaluating the level of knowledge, 85% of the students demonstrated moderately adequate knowledge about healthy food habits, while 15% exhibited adequate knowledge. Importantly, no students were found to have inadequate knowledge, suggesting a basic level of awareness exists among the majority of participants.

To assess the relationship between knowledge levels and demographic variables, a Chi-square test was conducted. The analysis revealed a statistically significant association between knowledge and parental education (p < 0.05), indicating that teenagers whose parents had higher educational qualifications were more likely to have better knowledge about healthy food habits. However, no significant associations were found between knowledge and variables such as age, gender, or parental occupation.

Overall, the interpretation of data suggests that while teenagers in the selected schools of Pampore have a foundational understanding of healthy food habits, there remains room for improvement—especially in areas where parental education is limited. These findings underscore the need for structured health education programs at the school level to enhance knowledge and promote lifelong healthy dietary behaviors.

Organization and Presentation of Data

Master sheet was used to record the acquired data in order to tabulate and perform statistical analysis. The following sections are where the data analysis is arranged and displayed:

Section I: Description of demographic variables of study subjects.

Section II: Description of level of knowledge scores among teenagers in selected schools of pampore

Section III: Description of level of knowledge scores among teenagers in selected schools of pampore with selected demographic variables

Section I: Description of demographic variables of study subjects

This section deals with the analysis and interpretation of the study subjects in terms of demographic variables which provides the background information of the study subjects and has been presented in the form of following tables and figures.

- Table 1 reveals the socio-demographic variables of teenager.Age: Maximum of teenager 20 are of 17-18 years of age, comprising 33.33%, followed by 19 teenager of 15- 16 years of age, comprising 31.67% and 17 of 13-14 years of age comprising 28.33%. The least teenagers 4 are belonging to age 19-20 and comprising 4%. As is evident from the above table
- **Gender:** Majority 33 of middle teenagers are female comprising 55% and 27(45%) are male.
- PEducational qualification of parents: Among the sample majority of teenagers 36(60%) have primary level as their parental educational qualification, 19(31.67%) were without any formal education and least no. of samples 5(8.33%) was having middle level as their parental qualification

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- Father's occupation: 24(40%) fathers were Businessman, followed by 15 (25%) as govt employee, 12 (20%) fathers as farmer. While as 9(15%) fathers were working in private sector.
- Type of family: Among the sample majority of family 29(48.33%) were joint, 15(25%) were from adoptive family, followed by 11(18.33%) from nuclear family and least no. of samples 5(13.34%) were from extended family.

Above graph shows maximum of teenager 20 are of 17-18 years of age, comprising 33.33%, followed by 19 teenager of 15-16 years of age, comprising 31.67% and 17 of 13-14 years of age comprising 28.33%. The least teenagers 4 are belonging to age 19-20 and comprising 4%. As is evident from the above table

Above cone diagram shows majority 33 of teenager are female comprising 55% and 27(45%) are male.

Above pie charts depicts that majority of teenagers 36(60%) have primary level as their parental educational qualification, 19(31.67%) were without any formal education and least no. of samples 5(8.33%) was having middle level as their parental qualification

From the above cylinder diagram it is evident that 24(40%) fathers were Businessman, followed by 15 (25%) as govt employee, 12 (20%) fathers as farmer. While as 9(15%) fathers were working in private sector.

Among the sample majority of family 29(48.33%) were joint, 15(25%) were from adoptive family, followed by

11(18.33%) from nuclear family and least no. of samples 5(13.34%) were from extended family.

Section II: Description of level of knowledge scores related to importance of healthy food habits among teenagers in selected schools of Pampore

This section deals with the analysis and interpretation of data obtained from knowledge scores related to importance of healthy food habits among teenagers in selected schools of Pampore.

The frequency and percentage distribution of level of knowledge scores related to importance of healthy food habits among teenagers is displayed above. Majority of teenagers among sample that is 51 (85%) have moderately adequate knowledge, while as 9(15%) teenagers have adequate knowledge and none of the teenager in sample have inadequate knowledge as is evident from the above table.

The above bar diagram shows knowledge scores related to importance of healthy food habits among teenagers is displayed above. Majority of teenager among sample that is 51(85%) have moderately adequate knowledge, while as 9 (15%) teenager have inadequate knowledge and none of teenager in sample have adequate knowledge.

The above table reveal the descriptive statistics of level of knowledge Scores related to importance of healthy food habits among teenagers in selected schools of Pampore.

The above bar diagram reveal the descriptive statistics of level of knowledge scores related to importance of healthy food habits among teenagers in selected schools of Pampore.

Table I.Frequency and Percentage distribution of study subjects according to their demographic variables

N=60

Characteristics	Frequency and Percentage distribution of Socio-demographic Variable				
	Content	Frequency	Percentage		
	13-14	17	28.33%		
Age (in years)	15-16	19	31.67%		
	17-18	20	33.33%		
	19-20	4	6.67%		
	Male	27	45%		
Gender	Female	33	55%		
	Other	0	0		
	No formal education	19	31.67%		
Parental educational	Primary level	36	60%		
qualification	Middle level	5	8.33%		
	Secondary/above	0	0%		

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	Farmer	12	20%	
Fathers occupation	Businessman	24	40%	
ratilers occupation	Govt-employee	15	25%	
	Private employee	9	15%	
	Joint	29	48.33%	
Time of family	Nuclear 11	18.33%		
Type of family	Extended family	5	13.34%	
	Adoptive family	15	25%	

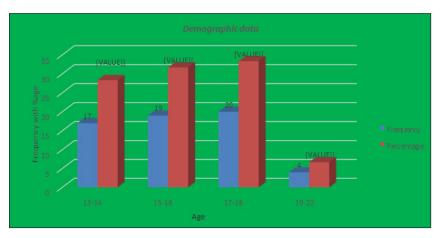


Figure 1.3D bar diagram showing frequency and percentage distribution of study subjects according to their age

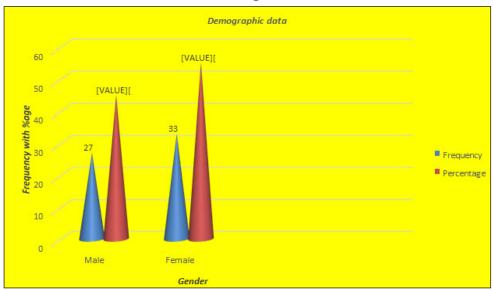


Figure 2.Cone diagram showing frequency and percentage distribution of study subjects according to their gender

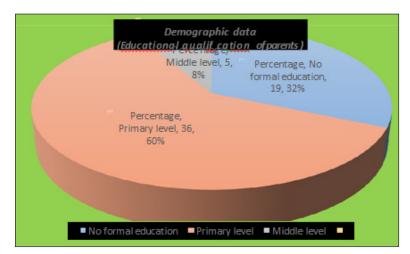


Figure 3.3D pie chart showing percentage distribution of study subjects according to their educational qualification

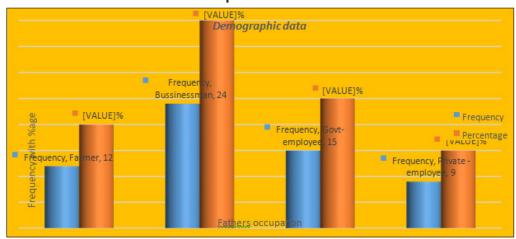


Figure 4.Cylinder showing frequency and percentage distribution of study subjects according to their father's occupation

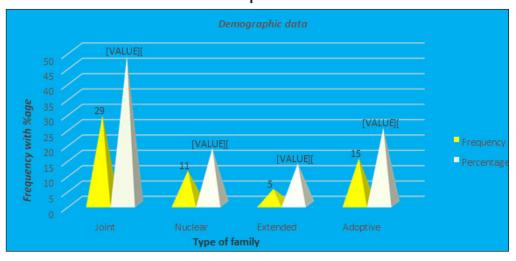


Figure 5.Pyramid showing frequency and percentage distribution of study subjects according to their type of family

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Table 2.Frequency and percentage distribution of level of knowledge scores related to importance of healthy food habits among teenagers in selected schools of Pampore

N=60

Level of knowledge	Frequency	Percentage
Inadequate knowledge (0-7)	0	0%
Moderately adequate knowledge (8-15)	51	85%
Adequate knowledge (16-20)	9	15%

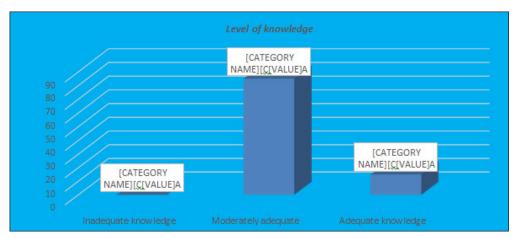


Figure 6.Bar Diagram showing knowledge scores related to importance of healthy food habits among teenagers in selected schools of Pampore

Table 3.Descriptive statistics of level of knowledge scores related to importance of healthy food habits among teenagers in selected schools of Pampore

(Mean ± SD)	Mode Median Minimum		Minimum	Maximum	Range	
(19.15±3.96)	19	18	10	20	10	

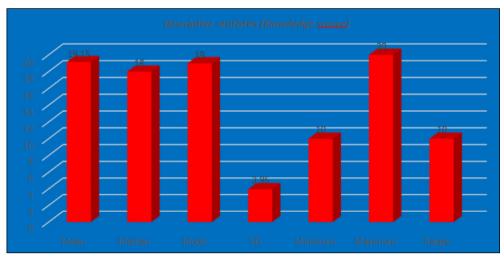


Figure 7. The descriptive statistics of level of knowledge scores related to importance of healthy food habits among teenagers in selected schools of Pampore

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Section III: Description of level of knowledge scores among teenagers in selected schools of pampor with selected demographic variables

Table 4.Association between knowledge with selected Demographic Variables

N=60

									N=60
	Association between knowledge with selected Demographic Variables.								
Variables	Opts	Inadequate Knowledge	Moderately adequate	Adequate Knowlege	2µ Test	2น table Value	df	P value	Interpretation
Age (years)	13-14	4	30	3	3.262	12.5	6	0.196	NS
	15-16	16	16	2					
	17-18	4	20	4					
	19-20	6	5	0					
	Male	26	16	3		9.41	4	0.196	NS
Gender	Female	1	18	6	3.26				
	Other	0	0	0	1				
	No formal education	18	8	2	12.05	9.41	4	0.358	S*
Parental	Primary	0	2	3					-
educational	level								
qualifica- tion	Middle level	30	22	1					
	Seconda ry/above	2	18	3					
	Farmer	18	44	1	2.738	12.5	6	0.098	NS
Fathana	Business man	20	18	1					
Fathers occupation	Govt-em- ployee	4	20	1	0.089	7.81	3	0.765	NS
	Private employee	1	0	6					
	Joint	16	16	3	18.92	12.5	6	0.098	S
	Nuclear	1	18	6					
Type of family	Extende d family	3	3	0					
	Adoptive family	0	0	1					

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Major Findings of the Study

The findings of the study provide valuable insights into the knowledge level of teenagers regarding the importance of healthy food habits. A total of 60 students from selected schools in Pampore participated in the research, and the demographic distribution showed that the highest proportion of participants (33.33%) were in the age group of 17–18 years, followed by 31.67% in the 15–16 years age group. The sample was composed of 55% females and 45% males, indicating a slightly higher participation of female students.

Parental education played a significant role in the study. Most of the participants (60%) had parents with a primary level of education, while 31.67% of the students' parents had no formal education, and only 8.33% had education up to the middle school level. This highlights a generally low educational background in the families of the respondents, which may influence awareness and practices related to nutrition at home.

In terms of knowledge regarding healthy food habits, the majority of students (85%) demonstrated a moderately adequate level of knowledge, while 15% showed an adequate level of understanding. Notably, none of the participants had an inadequate knowledge level, suggesting that a foundational awareness of healthy eating exists among the adolescents surveyed.

A significant association was observed between the knowledge level and the educational qualification of the parents, with a p-value less than 0.05, indicating that teenagers whose parents had higher education levels were more likely to possess better nutritional knowledge. However, no statistically significant associations were found between knowledge and other variables such as age, gender, or parental occupation.

Overall, the study revealed that although most students had a fair understanding of healthy food habits, there is a clear need for structured health and nutrition education within schools. The findings emphasize the

importance of integrating dietary awareness into the academic curriculum, particularly for students from lower socio-economic and less educated backgrounds, to promote healthier lifestyle choices and prevent nutrition- related health issues in adolescence and beyond.

Conclusion

The present study highlights the significance of enhancing nutritional awareness among adolescents, particularly in semi-urban regions like Pampore. The findings revealed that the majority of teenagers possess a moderately adequate level of knowledge regarding healthy food habits, while a smaller percentage demonstrated adequate knowledge. Importantly, none of the participants exhibited inadequate

knowledge, suggesting a basic level of awareness exists; however, it is not yet sufficient to ensure long-term healthy eating behaviours.

A statistically significant association between knowledge and parental education was identified, indicating that family background and educational status play a critical role in shaping adolescents' understanding of nutrition. Conversely, no significant relationships were found with other demographic variables such as age, gender, or parental occupation.

The study underscores the urgent need to implement structured nutritional education programs within school settings. Educational interventions targeted at both students and parents can serve as effective tools in promoting healthy lifestyle choices, reducing the risk of nutrition-related disorders, and fostering a culture of preventive healthcare.

In conclusion, improving teenagers' knowledge about healthy food habits through sustained school-based awareness initiatives can lead to better physical development, cognitive performance, and long-term well- being. Investing in nutritional education at this developmental stage is not only a public health priority but also a step toward building a healthier, more informed future generation.

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