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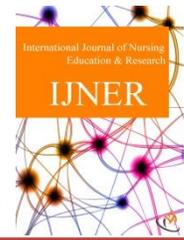
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A DESCRIPTIVE STUDY TO ASSESS THE KNOWLEDGE AND ATTITUDE REGARDING THE HEALTH HAZARDS OF JUNK FOOD AMONG ADOLESCENTS (16-19 YEARS) IN VIJAYAM JUNIOR COLLEGE, CHITTOOR, ANDHRAPRADESH

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ABSTRACT

The consumption of junk food has been increasing. Junk food causes many diseases like cardiac diseases, renal diseases, skin disorder and cancer. The major problem is people do not have adequate knowledge regarding junk food and its effects. Objectives: To assess the existing knowledge and attitude of adolescents regarding the health hazards of junk food. To find out the relationship between knowledge and attitude regarding the health hazards of junk food among adolescents. To find out the association between knowledge and attitude with the selected demographic variables among adolescents (16-19 years) regarding the health hazards of junk food. Methodology: A non-experimental descriptive design was used for the study. The sample consists of 53 adolescents. They were chosen by convenient sampling technique. The study was conducted at Vijayam Junior College, Chittoor. The data was collected by administering questionnaire. Study findings: Regarding knowledge it was found that majority [60.4%] of the adolescents had inadequate knowledge, [39.6%] of adolescents had moderate knowledge and no one of had adequate knowledge regarding health hazards of junk food. Regarding attitude of adolescents, [30.20] had favourable attitude, [56.60] moderately favourable attitude, and [13.20] had unfavourable attitude. The knowledge mean value 11.2 and the SD value is 17.69 and the SD value is 3.309,'r' value is 0.16. It represents that there is a positive relationship between knowledge and attitude among adolescent regarding health hazards of junk food. There is an association between knowledge and selected demographic variables such as gender, father's education, place of living during study, consumption of junk food, source of information regarding junk food. There is an association between attitude and selected demographic variables such as gender, age, family income, place of living during study, source of information regarding junk food. Conclusion: The overall experience of conducting this study was satisfying and enriching. The study was learning experience for us. The study shows that there is a great need to improve knowledge and attitude regarding health hazards of junk food among adolescents [16-19] years.

INTRODUCTION

Food is an important part of a balanced diet. It is something everyone needs every day. Life can be

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sustained only with adequate nourishment Man needs food for growth, development and to lead on active and healthy life [1]. Food is a substance, usually composed of carbohydrates, fats, proteins and water that can be eaten or

drunk by an animal or human for nutrition or pleasure. Junk food is the term given to food that is high in calories but low in nutritional content. In adolescents both boys and girls undergo several physical and psychological changes which make them to because partly responsible for their own health and welfare [2]. Junk foods have no or very less nutritional value and irrespective of the way they are marketed they are not healthy to consume.

Need for the Study

Adolescent preferred junk food, due to peer pressure, dislikes the food at home, poor feeding in hostel and taste and colour of food. Eating of junk food can be prevented by a proper health education among people especially adolescent, the health education can be provided by health worker, teachers, parents, medical students and nursing students. A proper health education can be provided by using AV aids & social media. As an educator and health promoter, nurses have the responsibility to educate adolescents about health hazards of Junk food consumption. As a part of the education process, nurses should also assist families in formulating a plan to combat ill effects of junk foods.

Statement of the Problem

A descriptive study to assess the knowledge and attitude regarding the health hazards of junk food among adolescents (16-19 years) in Vijayam Junior College, Chittoor.

Objectives

- To assess the existing knowledge and attitude of adolescents regarding the health hazards of junk food.
- To find out the relationship between knowledge and attitude regarding the health hazards of junk food among adolescents.
- To find out the association between knowledge and attitude with the selected demographic variables among adolescents (16-19 years) regarding the health hazards of junk food.

Research Hypothesis

➢ There will be a significant relationship between knowledge and attitude regarding health hazards of junk foods.
➢ There will be a significant association between knowledge and attitude regarding health hazards of junk foods with the selected demographic variables [3].

Limitations

➢ This study period was limited to 2 weeks
➢ Sample size was limited to 60 adolescents only.

➢ This study was limited to adolescent in the age group of 16 to 19 years
➢ This study was limited to adolescent who are studying in Vijayam Junior College, Chittoor.

Projected Out Come

The study finding will help to improve the knowledge of adolescent (16-19 years) regarding health hazards of junk food. It helps to prevent the occurrence of illness due to junk food.

METHODOLOGY

Research methodology includes research design, setting of the study, population, sample size, sampling technique, criteria for sample selection and description of the instruments.

Research Design

The research design selected for this study was descriptive in nature.

Setting of the Study

This study was conducted in Vijayam Junior College. The setting was chosen on the basis of adequate sample and the co-operation extended by the students [4].

Population

The population for this study includes the adolescent's age group of 16-19 years. The targeted population was the adolescents (16-19 yrs) of Vijayam Junior College. The accessible population was the adolescents (16-19 yrs) of Vijayam Junior College, who are available during the study and meeting the inclusion criteria.

Sample Size

A sample size of 53 adolescent at the age group 16-19 years in Vijayam Junior College was selected for this study.

Sampling Technique

Convenient sampling technique was used to select adolescents based on inclusion criteria.

Criteria for Sample Selection
Inclusion Criteria
1. Adolescents at the age group of 16-19 years at Vijayam Junior College.
2. Adolescents who are co-operative.
3. The adolescents who know to read and speak English.

Exclusion Criteria
1. Adolescents who's age is less than 16 and more than 19 years.

2. Adolescents who are not willing to participate in the study.
3. Adolescents who do not know English & Telugu.

Description of the Tool
The study was conducted by using questionnaire. It has 3 parts.
Part 1. It consists of demographic variables.
Part 2. It consists of multiple choice questions on knowledge related to health hazards of junk food.
Part 3. It consists of statements on attitude related to health hazards of junk food.

Scoring Procedure
The knowledge regarding health hazards related to junk food among adolescent at the age group of 16-19 years was measured by using knowledge questionnaire [5]. Each correct answer was given a score of 'one' and wrong answer '0'
The knowledge score was interpreted on follows:
  Inadequate knowledge: 80-100%
  Moderately adequate knowledge: 60-79%
    Adequate knowledge: < 60%
There are totally 12 statements, 5 positive statements, 7 negative statements. The items will be measured on a 3 point scale from agree to disagree. The maximum score for measuring attitude was 24.
Attitude score will be interpreted as follows: -
    Favourable: 80-100%
    Moderately favourable: 60-79%
    Favourable; less than 60

Pilot Study
After obtaining formal permission from the authorities, the pilot study was conducted in Rukmini Krishnaswamy College among 10 subjects. They were selected by using non probability convenient sampling technique. The investigator given introduction, explained the purpose of the study and oral consent was obtained from the subjects. The data was collected from the sample by using structured questionnaire. Considering the results and opinion of experts, the investigator decided to carry out a detailed study [6].

Data Collection Procedure
After obtain formal permission from the college authorities, the investigator selected the adolescents in the Vijayam Junior College, Chittoor. The study samples were selected by non probability convenient sampling technique. After providing purposes and objectives of study, we got consent from the samples, data was collected from them.

Plan for Data Analysis

Collected data were tabulated and analyzed by using descriptive and inferential statistics.
Descriptive statistics were used to find out the frequency, percentage, mean and standard deviation of demographic variables to assess the knowledge and attitude regarding health hazards of junk food.
The chi square test was used to analyze association between selected demographic variables of adolescent with knowledge and attitude regarding health hazards of junk food.

Protection of Human Rights
The investigator got prior permission from the chairman of Vijayam Junior College after brief explanation and self-introduction. Willingness of the subjects was ensured. Knowledge questionnaire was provided to the selected study samples. Privacy and absolute confidentiality of their identity was maintained by the investigator.

Data Analysis and Interpretation
The results showed that, regarding gender, majority 31(58.4%) adolescents are female, and minority 22(41.5%) adolescents are male. Regarding age, majority 31(58.4%) adolescents are in the age 17-20 years and minority 22(41.5%) adolescents are in the age 16-19 years. Regarding residence, majority 38(71.6) adolescents belongs to urban and minority 15(28.3%) adolescents belongs to rural area [7]. Regarding type of family, majority 48(90.5%) adolescents were belongs to nuclear family and minority 05(9.4%) adolescents were belongs to joint family. Regarding religion, majority 41(77.3%) adolescents were belongs to Hindu, 11(20.7%) adolescents were belongs to Muslim, and 01(1.8%) adolescent belongs to Christian. Regarding dietary pattern, majority 38(71.6%) adolescents were taking non-vegetarian food and minority 15(28.3%) adolescents were taking vegetarian food. Regarding mother's education, majority 16(30.1%) adolescents' mothers were educated up to degree, 11(20.7%) adolescents' mothers were educated up to high school and middle school, 7(13.2%) adolescents' mothers were educated up to higher secondary and primary school and 02 (3.7%). Regarding father's education, majority 16(30.1%) adolescents' fathers were educated up to college education, 11(20.5%) adolescents' fathers were educated up to high school, 11(20.5%) adolescents' fathers were educated up to middle class, 7(13.2%) adolescents' fathers were educated up to primary school, 6 (12.2%) adolescents' fathers were educated up to higher secondary, 2(3.5%) adolescents' fathers had non-formal education. Regarding mother's occupation, majority 43(81.1%) adolescents' mothers were house wife, 4(7.5%) adolescents' mother are going for coolie work and office work and minority 2(3.7%) adolescents'

mothers are doing self work. Regarding family income per month, majority 23 [41.5%] adolescents' family income is Rs.10,000 - 15,000/-, 13 [24.5%] adolescents' family income is Rs. 5000-10,000 and above 15,000 and minority 5 [9.4%] adolescents' family income is < 5000. Regarding place of living during the study, 53 [100%] adolescents are day scholars. Regarding habit of eating junk food, majority 46 [86.7%] adolescents are having the habit of eating junk food, and minority 7 [13.2%] adolescents are not having the habit of eating junk food. Regarding the frequency of eating junk food, majority 29 [54.7%] adolescents are taking junk food once a week, 16(30.1%) rarely, 5 (9.4%) adolescents are taking junk food every day and 3 [5.6%] adolescents are taking junk food once in a month [8]. Regarding junk food taken by the family members, majority 37 [69.8 %] adolescents' family members are taking junk food and minority 16 [30.1%] adolescents' family members are not taking junk food. Regarding source of information about junk food, majority 23 [43.3%] adolescents knows about junk food through television, 19[36.5%] adolescents knows about junk food

through friends, 9 [16.6%] adolescents knows about junk food through others and minority 2 [3.6%] adolescents knows about junk food through news paper.

Table-1 shows the level of knowledge among adolescents regarding health hazards of junk food. Out of 53 adolescents, 32 (60.4%) adolescents had inadequate knowledge, 21 (39.6%) adolescents had moderately adequate knowledge and no one had adequate knowledge.

Table-2 shows the level of attitude among adolescents regarding health hazards of junk food. Out of 53 adolescents, 30 (56.6%) adolescents had moderately favourable attitude, 20 (30.12%) adolescents had favourable attitude and 3 (5.66%) adolescents had Unfavourable attitude [9].

Table-3: Presents the distribution of relationship between knowledge and attitude regarding health hazards of junk foods among the adolescents of (16-19) years.

The knowledge mean value is 11.2 and the SD value is 2.04. The attitude mean value is 17.69 and the SD value is 3.31. The relationship between knowledge and attitude 'r' value is 0.16.

Table 1: Distribution of level of knowledge among adolescents between (16-19) years of age regarding health hazards of junk food.

S.No.	Level of Knowledge	Frequency	Percentage
1.	Adequate Knowledge (80-100%)	0	0
2.	Moderately adequate knowledge (60-79%)	21	39.6%
3.	Inadequate knowledge < 60%	32	60.4%

Table 2: Distribution of level of attitude among adolescents between (16-19) years of age regarding health hazards of junk food.

S. No	Level of attitude	Frequency	Percentage
1.	Favorable attitude (80-100%)	20	30.12%
2.	Moderately favorable attitude (60-79%)	30	56.60%
3.	Unfavorable attitude (< 60%)	3	5.66%%

Table 3. Distribution in relationship between knowledge and attitude regarding health hazards of junk food among adolescents of (16-19) years. N=53

Variable	Mean	SD	'r' value
Knowledge	11.2	2.04	
Attitude	17.69	3.31	0.16

Figure 1: Distribution of level of knowledge among adolescents between (16-19) years regarding health hazards of junk food.
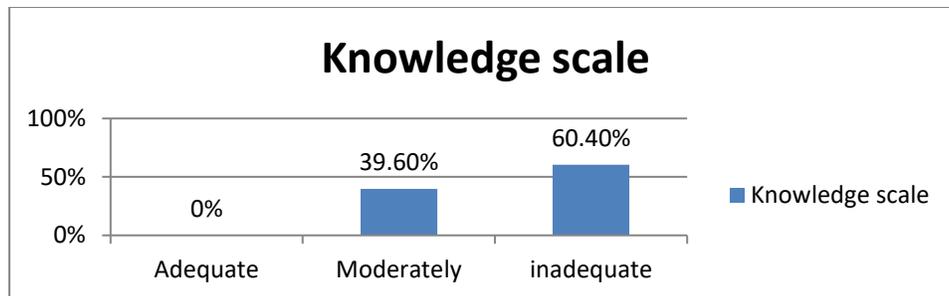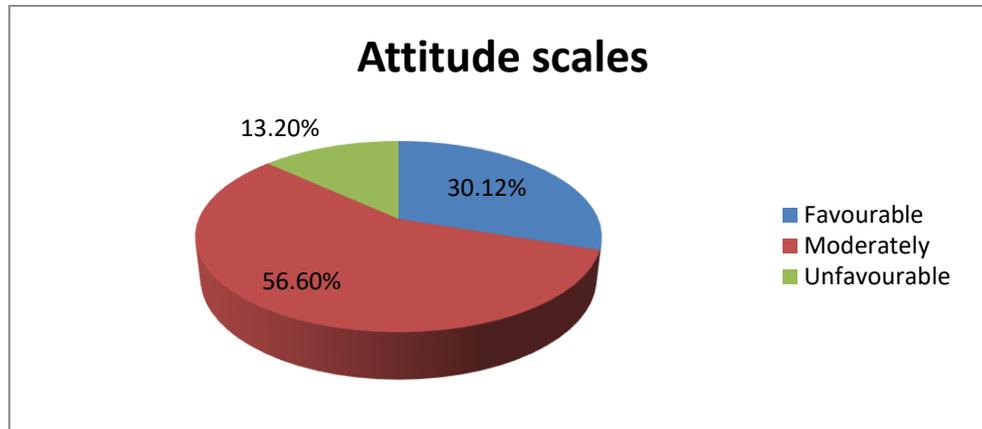
Knowledge scale

Figure 2: Distribution of level of attitude among adolescents between (16-19) years regarding health hazards of junk food

Attitude scales

DISCUSSION

The first objective of the study was to assess the existing knowledge and attitude regarding the health hazards of junk food among adolescents studying Vijayam Junior College, Chittoor. Regarding the level of knowledge among the study samples, 60.4% had inadequate knowledge, 39.6% had moderately adequate knowledge and no one had adequate knowledge. Regarding the level of attitude among the study samples, 13-20% had unfavourable, 56.6% are moderately favourable attitude and 30.12% are favourable attitude.

The second objective of the study was to find out the relationship between the knowledge and attitude on health hazards of junk food on adolescent with the age group of 16-19 years [10]. The knowledge mean value 11.2 and the SD value is 17.69 and the SD value is 3.309,'r' value is 0.16. It represents that there is a positive relationship between knowledge and attitude among adolescent regarding health hazards of junk food.

The third objective of the study was to find out the association between knowledge and attitude with the selected demographic variables among adolescent regarding health hazards of junk food. There is an association between knowledge and selected demographic variables such as gender, father's education, place of living during study, consumption of junk food, source of information regarding junk food. There is an association

between attitude and selected demographic variables such as gender, age, family income, place of living during study, source of information regarding junk food.

Nursing implication.

The result of the study proved that the adolescents need, health education regarding health hazards of junk food to improve the knowledge and attitude.

Nursing Practice

The consumption of junk food among the adolescent should be decreased to prevent the further incident of disease like hypertension, skin disorder, obesity etc .

Nursing education

Nursing education should prepare the nurses with the potential for imparting health information effectively and assisting the adolescent in developing their self care potentials [11].

Nursing research

Research should be done to find out cause and prevention of hazards of junk food among adolescent. Research can be conducted to find out different innovative

method to teach the adolescents to prevent hazards of junk food.

Recommendation
1. The study can be replicated on large sample in different settings

2. A similar study can be conducted as a comparative study between the urban and rural adolescent.
3. An experimental study can be conducted with structured teaching programme on hazards related to junk food.

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Research Article