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## A study on prevalence of fast food intake among urban and semi urban adolescent students of Guwahati

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### Abstract

Consumption of fast foods has become almost a global phenomenon. The street food and fast food trade is a growing sector in many developing countries today. Its expansion is linked with urbanization and the need of urban and semi-urban populations for both employment and food. So the research study was planned to find out the "Prevalence of Fast Food Intake among Urban and semi urban Adolescent Students". For the collection of data a representative sample of 200 urban and semi-urban adolescent students were randomly selected in the target area i.e. urban and semi-urban areas of Guwahati city namely Narengi, Panikhaiti, Six mile, Downtown, Jayanagar and Ganeshguri. A structured questionnaire was administered and interviews were carried out on the students in different schools and colleges and market places of the Guwahati city to gather the data related to the subject. It was found from the study that a large majority of the respondents belonged to the age group of 19-20yrs (70%), while 30% of them were between 21-24yrs. Among these 74% of them were hostellers. About 44% of them carried packed lunch while rest 56% of the respondents do not carry packed lunch and eat fast food during their lunch time. About 94% of the respondents replaced at least one of their meals with fast food while 6% replaced more than 2 meals with fast food. A large majority of consumers reported incidences of food contaminated with hair, nails, stones, thread etc. Awareness of health hazards associated with fast foods use among 68% participants observed in this study. Emotional states like boredom, stress and depression also has an influence on fast food intake of adolescents. On the other hand, flavour, variety, brand, fast service and availability were found main driving force in fast food intake. Also exposure to advertisements, media influence and urbanization were found chief factors in fast food intake.

**Keywords:** Fast Food Intake, Global Phenomenon, Agricultural Organization

### Introduction

The Food and Agricultural Organization defines street foods as ready-to-eat foods and beverages prepared and/or sold by vendors and hawkers, especially in streets and other similar public places (Simopoulos, 2000). Street food is food obtained from a street side vendor, often from a makeshift or portable stall (FAO, 2007) [3]. Street foods provide ready - to - eat and fairly inexpensive priced snacks and meals for a wide variety of people. Street food feeds millions of people daily with a wide variety of foods that are relatively cheap and easily accessible (Latham, 1997; Tambekar *et al.* 2011) [9, 17]. Street food is intimately connected with take-out, junk food, snacks, and fast food (Lues *et al.* 2006) [10]. Street food is also regarded as tasty (Tambekar *et al.* 2011) [17], distinguishable by its local flavour and can be purchased on the sidewalk, without entry into a building (Lues *et al.* 2006) [10].

Consumers often use their senses in their descriptions of safe food, and feel that food that looks or smells bad should not be eaten (Seward, 2003). They cannot tell the risk of incurring a food-borne illness at the time of purchase or consumption of a food item, because the extent of microbial contamination or the level of chemical residues cannot be observed (Roberts *et al.*, 2003) [14]. Fearing food-borne illness, some consumers may cut purchases of certain food items or avoid consuming them altogether (Roberts *et al.*, 2003) [14]. Consumers need to make informed choices about their food and how it is handled and prepared. Therefore a survey was conducted to study the Prevalence of Fast Food Intake among Urban and semi urban Adolescent Students.

Food safety is the assurance that food will not cause harm to the consumer when it is prepared and eaten or consumed according to its intended use (FAO/WHO, 1997) [4]. Millions of people fall ill and many suffer from serious disorders, long-term complications or die as a result of

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eating unsafe food (FAO, 2007) [3]. Food borne and waterborne diarrhoea diseases are leading causes of illness and globally kill an estimated 2.1 million people annually, most of whom are children in developing countries (WHO, 2001) [18]. The high prevalence of diarrhoea diseases in many developing countries suggests major underlying food and water safety problems (WHO, 2011) [19]. Generally, research indicates that food safety is not a factor, which influences the public's choice when selecting an eating establishment.

Street food vendors are often unlicensed, untrained in food hygiene and sanitation, and work under unsanitary conditions (FAO, 1997) [2]. FAO further stipulates that street foods raise concern with respect to their potential for serious food poisoning outbreaks due to improper use of additives, the presence of adulterants, environmental contaminants and improper food handling practices amongst street food vendors (FAO, 1997) [2].

### Methodology

The study was undertaken to access the prevalence of fast food intake among urban and semi-urban adolescents. The data for the study was collected from both the sources viz. primary and the secondary. Collection of primary data was carried out by perceiving the views and ideas from the adolescents through filling up of structured questionnaire and interview. Collection of secondary data was carried out by information obtained from various books and journals. A sample of 100 adolescents (including both boys and girls) from different schools and colleges residing in urban and semi-urban areas of Guwahati city namely Narengi, Panikhaiti, Six mile, Downtown, Jayanagar and Ganeshguri were randomly selected for the present study. The data was then arranged, tabulated and discussed upon and was presented with the help of tables and figures. The data was further statistically analyzed by presenting the information through percentages, mean, standard deviation

### Results and Discussion

A total of 200 students were interviewed for their fast food consumption pattern, out of which 56% were girls and 44% were boys. The age distribution of the adolescent boys and girls showed that more than half of them belonged to the age-group 19-20yrs (70%), while 30% of them were between 21-24yrs. Occupational status of their parents showed that 69% were housewives, and 31% were professionals. Among the fathers, 40% were professionals, 24% had clerical jobs, 6% had skilled technical jobs, and 30% owned a business. The average monthly family income reported was less than Rs 10,000 in 30% of the adolescents while, in about 20%, it was between Rs 10,000 and 20,000 per month and almost 50% reported monthly income more than 20,000 per month. Ninety percent of the respondents were Hindu. Almost 70% of the adolescents came from nuclear families and the rest from joint families. Among these 74% of them were hostellers. Various studies have reported that numbers of hostellers indulged in fast food consuming are comparatively more. From the study it was revealed that a relatively large percentage of adolescents skipped their lunch on a regular basis. About 44% of them carried packed lunch and prefers fast food mostly in the evening while rest 56% of the respondents do not carry packed lunch and eat fast food during their lunch time and 94% of the respondents replaced at least one of their meals with fast food while 6% replaced more than 2 meals with fast food. Easy availability of fast foods at any time of the day as reason for fast food usage stated by few in this study was also mentioned

in other studies. Zhu SP *et al.* (2008) [20] and Denney-Wilson *et al.* (2009) [1].

Regarding the opinion of the respondents on whether they get lured by the attractive presentation of fast foods, it was found that most of the respondents agreed to this statement. Studies have also found that youngsters who watch more television are more susceptible to unhealthy eating habits and unhealthy conceptions about food substances compared to others who watch minimally (Signorielli N, Lears M., 1992) [16]. In this study fast food consumption as a favourite leisure time activity was reported by one fourth of the students. Data also revealed that emotional states like depression, boredom or worry also influences eating behaviour. Eating during emotional states such as while feeling bored (60%), while feeling depressed (18%) and while feeling worried (22%) were other reasons for fast food consumption, similar results was also stated by participants in Syria (Musaiger A, Kalam F., 2014) [12] and physiological and psychological factors stated by participants in China (Zhu SP *et al.*, 2008) [20]. Therefore, psychological factors could also play a role in making children habituated with fast food consumption.

**Table 1:** Socio demographic characteristics and eating habits among respondents (n = 200)

Variables	Percentage
<b>Age</b>	
19-20 yrs.	70%
21-24 yrs.	30%
<b>Occupational status of parents(Mother)</b>	
Housewives	69%
Professionals	31%
<b>Occupational status of parents(Father)</b>	
Professionals	40%
Clerical jobs	24%
Skilled technical jobs	6%
Business	30%
<b>Average monthly family income</b>	
< 10,000	30%
10,000-20,000	20%
> 20,000	50%
<b>Residence</b>	
Hostellers	74%
Day scholar	26%
<b>Packed lunch</b>	
Carried packed lunch	44%
Did not carry packed lunch	56%
<b>No of meals replaced with fast foods</b>	
One	94%
Two	6%
<b>Emotional states influencing eating behaviour</b>	
Boredom	60%
Worry	22%
Depression	18%
<b>Awareness of health hazards associated with fast foods use</b>	
Present	68%
Absent	32%
<b>Consumption of fast foods</b>	
Continued fast food consumption even after being aware of its health hazards	94%
Discontinued eating	6%

A large majority of consumers reported incidences of food contaminated with hair, nails, stones, thread etc. Awareness of health hazards associated with fast foods use among 68% participants observed in this study was similar to that of the study done in Chandigarh, India as reported by 64.8%

adolescents (Puri S *et al.*, 2007) <sup>[13]</sup>. Although 56% of the consumers reported incidences of health problems after eating fast foods. They, however did not relate this to their eating habits. A big gap was noticed between knowledge and practice of students in this study. Almost 94% of those aware of health hazards continued to eat fast foods and only 6% of them felt the need to control its usage. Various studies have shown that the general awareness of adolescents regarding healthy eating habits is relatively average or good, but the problem lies in the fact that they do not translate this knowledge into good food behaviour. Story M and Stang N (2005) <sup>[11]</sup> studied the eating habits of teenagers using small group discussion format and qualitative survey methods among 900 high school students in Minnesota. The results revealed that majority of the students agreed to the fact that they are not eating right but they felt that diet is not “too big a bother” and they are too busy and pressured to think much about food.

Knowledge about food is considered to be beneficial not only for food choice and healthy weight reduction but also as concerns its long-term implications for general health. Fast foods have poor nutritional quality as they do not provide any proteins, vitamins and minerals but only supply empty calories to our body. Thus, the excessive consumption of fast foods can lead to many nutritional deficiency diseases and can also result in obesity a life threatening condition. The findings clearly showed that despite of being aware of the fact that fast food is not a good alternative to healthy food, the frequency of consumption of these food were very high and 100% of the consumers agreed that frequent consumption of fast food is the leading cause of obesity and other health hazards like heart disease and diabetes.

It was evident from the present study that 76% of the respondents agreed that if the same food is prepared at home they would prefer eating at home as preparation at home would mean proper hygiene and sanitation, however, 24% of them differed in this opinion and responded that they would continue eating out and would not compromise on the taste of street foods. In an attempt to find out the preference of foods, it was inferred that the respondents preferred fast food not only for their taste but also convenience and fast service. This might be because the current food advertising rarely promotes healthy choices and rather promotes frequent consumption of unhealthy foods making it even difficult for most parents to promote healthy eating at home (Kourlaba G *et.al.* 2009) <sup>[8]</sup>. Therefore advertisement guidelines related to quality of food products in mass media needs formulation and strict implementation (Kaushik JS *et al* 2007).

High socioeconomic status was also found to have a association with junk food consumption among the adolescents in the present study. This finding is supported by the findings of the Joshi *et al.*, (2012) <sup>[6]</sup> where majority of their study subjects (96%) were consuming junk foods and the high prevalence was partly attributed to their socioeconomic status as evidenced by higher junk food consumption (89.2%) among either upper or upper-middle socio-economic class.

### Conclusion

In spite of good number of participants being of health hazards of fast foods, the need to control its usage was felt by 65% and only 6% stopped consumption. There is thus a need for nutrition counselling to bridge the gap between knowledge and practice about healthy eating behaviour. The findings of this study also reveal areas of improvement which would translate into positive change towards attaining safe street food. This would also solve the problem of overweight and food borne

illness among children which was found significantly more among fast food users in this study. Most of the fast food consumers said that they were eating it because of being bored with home food. Therefore, the views of children on factors at home which affect their desire to eat healthy foods need to be understood and addressed appropriately.

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