# RESEARCH ARTICLE

# ASSESSMENT OF SCHOOL TIME EATING HABITS IN CHILDREN OF QUETTA

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**ABSTRACT**

**Aim:** This study aimed to compare the eating habits of the children from lower socioeconomic status and higher socioeconomic status. **Introduction:** Nutrition is the intake of food, considered in relation to the body's dietary needs. Good nutrition an adequate, well-balanced diet combined with regular physical activity – is a cornerstone of good health. It is beneficial for the physical, neurological and cognitive development of individuals. In the larger perspective, good nutrition defines the quality of health in a community. On the other side of the spectrum, poor nutrition can lead to reduced immunity, increased susceptibility to disease, impaired physical and mental development, and reduced productivity. **Materials and Methods:** A cross-sectional study was conducted in the district Quetta. A sample of 100 students was selected and divided into two groups i.e. group 1, and group 2. Group 1 was taken from government school located in the slums of Quetta, while group 2 was taken from a public school located in a posh area of Quetta. Students were interviewed about their food pattern of the last 2 days and their input was recorded. **Results:** It is evident from this study that the main food children having during school time is junk food irrespective of socioeconomic status. Children in good socioeconomic status were skipping more frequently than in the lower class. Kids in lower class were having food insufficiency and there was no variety in their food. In the 2nd group, although they were having milk and fruit. The food they were used to eat were mainly junk food. **Conclusion:** Intake of junk food in higher socioeconomic status is more prevalent than in lower socioeconomic status due to unaffordability.

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## INTRODUCTION

In the present era, humans have progressed in every sphere of life. There are many advancements that have been introduced in the field of nutrition which has both good and bad aspects. To save time, fast food was introduced to meet the demands. It worked to be effective in managing time but has been the reason for introducing junk foods to humans (Pollitt, 1984). Since national or community development depends largely on the quality of education, an understanding of the of the nature of the relationship between health and education is important for masses as well as policy planners. It has been established that poor health and malnutrition in early childhood may affect cognitive abilities. an educational world filled with failing school and apathetic students, boards of education have

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searched for answers on how to increase test scores and create a school system where all students receive the best education. Amongst the plethora of possible solution, perhaps they should look first at the nutritional substance of what our school-aged children are eating each day as they struggle through a day of learning (Popkin, 2013). It is a general belief that the basis for any true development must commence with the development of human resources. Poor dietary intake has been associated with poor academic performance (Ybanez, 1982). Health is an important factor for academic achievement at school. Poor diet shows different pictures in developing and developed countries among children. For example, the prevalence of obesity in children has increased threefold or more during the last three decades in developed countries (Rausch, 2013). Food insufficiency has a multitude of consequences for school-age children. these include poorer health which leads to an increase in illnesses, infections and iron deficiency, poorer academic performance, grade repetition and increase in psychological

issues (Bowman, 2004). Developing countries like Pakistan, where resources are limited and have compromised Health. Nutrition is a major problem in developing countries that not only affect the physical aspects of individuals but also affects mental growth as well (Brown, 2002). This study aimed to compare the eating habits of the children from lower socioeconomic status and higher socioeconomic status.

## MATERIAL AND METHODS

A cross-sectional study was conducted in the district Quetta. A sample of 100 students was selected and divided into two groups i.e group 1, and group 2. Group 1 was taken from government school located in the slums of Quetta, while group 2 was taken from a public school located in a posh area of Quetta. Students of 4th and 5th grades, having age in the range of 11-12 years with either gender, were included in the study. Informed consent was signed by their parents and permission was sought from school authorities. Students were interviewed about their food pattern of the last 2 days and their input was recorded.

## RESULTS

This study shows that there is a clear difference between the eating habits of children from a privileged class and children who belongs from an economically deprived class.
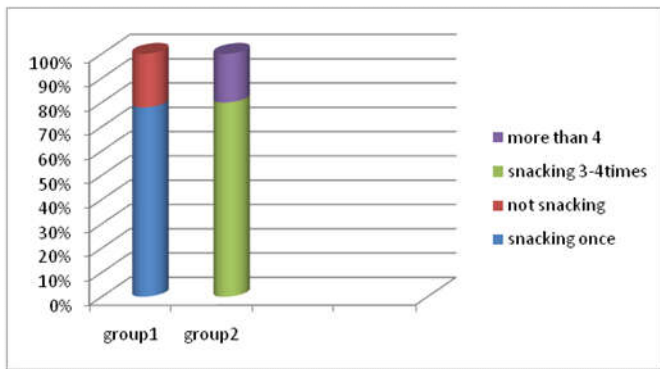


**Figure 1 Frequency of snacking in group1 and group 2**

According to Figure 1, 78% of Children in group 1 were snacking only once in a day. 22% were not snacking at all. Meanwhile, in the group2, 80% were snacking 3-4 times a day while 20% were snacking even more.
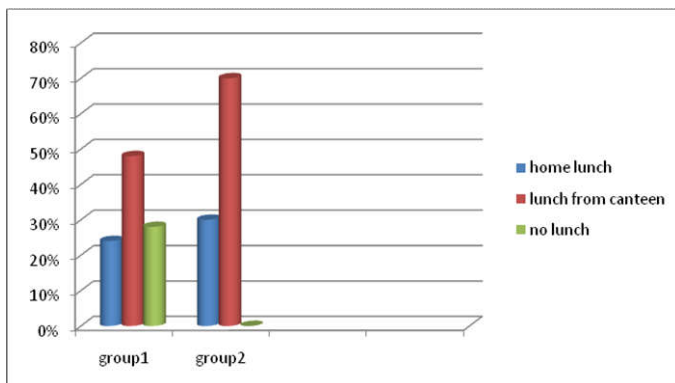


**Figure 2. Comparison of home lunch vs canteen food in group1 and group2**

According to Figure 2, 48% of children in group 1 were buying junk foods from school's tuck-shop. 24% of group1 were bringing lunch from home that included rice (10%) and dal along with vegetables and bread (14%). In group 2, 70% of students were buying junk food from school canteen, 30% were bringing lunch from home that included fast foods (16%) and healthy foods (14%).
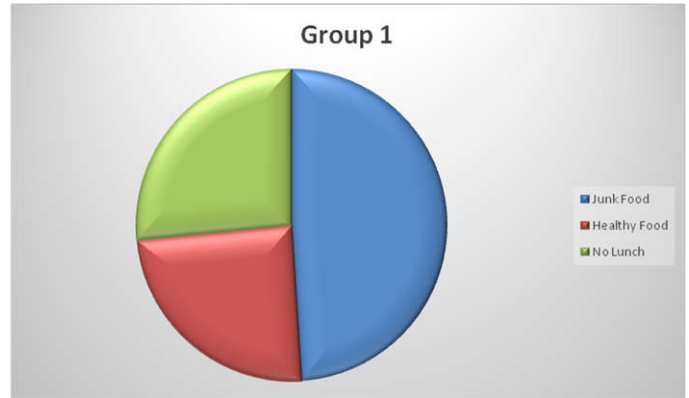


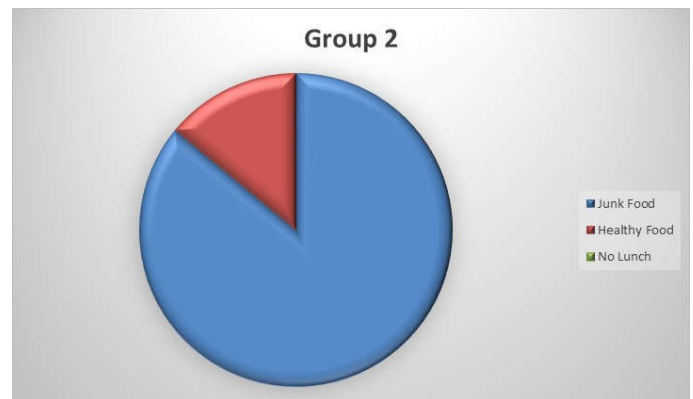**Figure 3. Comparison of healthy food and junk food during school time in Group 1**



**Figure 4. Comparison of healthy food and junk food during school time in Group 2**

According to Figure 3 and 4, Students from group 1 were taking fewer junk foods as compared to group 2 but the ratio of health food in group 1 was way better than group 2.
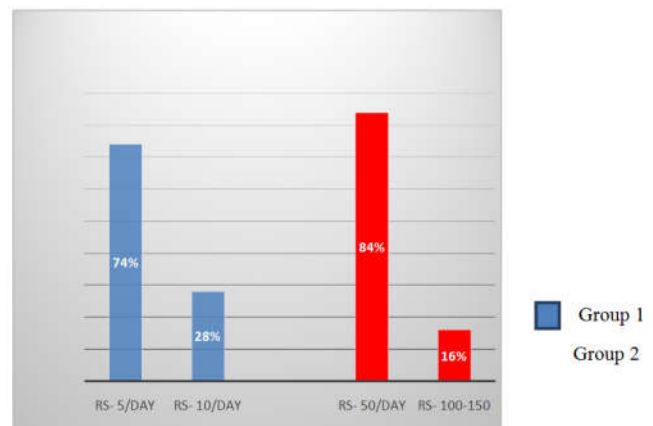


**Figure 5. Comparison of pocket money in group1 and group 2**

According to Figure 5, In group 1 there were 74% kids who had pocket money of Rs.5 rupees /day. 26% were bringing

Rs.10/day. However, in group 2 there were 84% kids had pocket money of 50/day while 16% were bringing 100-150/day.In group 1, only 2% of kids were skipping their breakfast while in group 2 there were 10 % of students who were skipping breakfast. In group 1 only 3% were buying edible from outside the school after off time while in group 2, 66% were buying edible things outside the school. In group 1, 99.9% of kids were not drinking milk or having fruits but group 2,80% of kids were drinking milk and 70% of kids were having fruits. Group 1 had no drinking water in school neither they were bringing from home. In group 2, students had the facility of both hot and cold water at school and they were also bringing water from home. In group 1, students were buying only 2 items from the school tuck shop i.e paparh and sweets. while in group 2, students were buying a variety of food i.e burger, pizza, juices, roll, samosa, spaghetti, doughnuts, and Nimco.

## DISCUSSION

Malnutrition is a major problem across the world, both in developed and developing countries and deficiencies in some nutrients have been reported to cause diseases which could lead to impaired cognitive development (Johnston, 1987). A study suggested that brain needs amino acid and choline from external sources in order to provide the brain with an adequate amount of constituents required for the synthesis of necessary chemicals such as serotonin acetylcholine and norepinephrine (Colby-Morley, 1983). The brain comprises 60% fats and brain cells help to a regular aspect of the immune system. Essential lipids like omega- 3 is also required by the body in order to keep the brain well-nourished and stave off inflammation, enhance memory and alleviate mood by raising serotonin (Erikson, 2006). In America, the customary diet of children and adults is high in total fat and saturated fat. the association of fat intake with psychosocial and cognitive functioning in the US has been studied in school-age children. since it had been unclear whether and how specific fats may affect social and cognitive function in school-age children (Zhang, 2005). Decrease amount of zinc in the diet affects memory by slowing down the brain ability to recall information. A connection was also made between short act on a child's health. Food-insufficient children were more likely to experience issues that would impact their health through biological means such as reduced intake food, quality or micronutrient deficiency and psychological issues through increased stress, worry, and feeling of deprivation. This study demonstrated an association between food insufficiency, poverty status and children poor health (Wood, 2001).

### Conclusion

It is evident from this study that the main food children having during school time is junk food irrespective of socioeconomic status. Intake of junk food in higher socioeconomic status is more prevalent than in lower socioeconomic status due to unaffordability.

Within group 2, it has been noticed that whether the mothers are working or not the majority of mothers are giving junk food as school lunches. It has been observed that children in good socioeconomic status were skipping more frequently than in the lower class. Kids in lower class were having food insufficiency and there was no variety in their food. In the 2nd group although they were having milk and fruit the food they were used to eat were mainly junk food.

### Recommendations

There is a dire need of nutrition awareness programs which needs to be launch at national level covering all the areas of the country. A national school lunch program should be started for the poor students it will not only rise school enrolment but academic performance might get better with this investment.

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