EFFECT OF FAST FOOD CONSUMPTION ON THE HEALTH OF SCHOOL GOING CHILDREN - A STUDY OF SHAMLI UTTAR PRADESH

Mr. Rohit Bisht Assistant prof., Mr Shailendra Rai Assistant prof.

Hotel management Chandigarh College of hotel management Landran Mohali Punjab

Hotel and Tourism management Chandigarh College of Hospitality Landran Mohali punjab

Abstract - Fast food costs relatively little and tastes good, but the negative effects on physical health last much longer than these immediate concerns. With the high-calorie meals come more fat, cholesterol, salt and sugar and therefore fewer vitamins, minerals and other nutrients than in healthier foods.

The objective of this study to know about the effect of fast food consumption on the health of school going children (9-13year). Total of 100 school going student were selected from five different schools of Shamli District. The study was carried out by using the following tools to analyze the effect of fast food consumption health of respondents. Self designed & pre tested questionnaire was used in the study. SPSS version 20 was used to draw meaningful inferences from the collected raw data.

Key Words: effect of fast food, health status, school going children

1. INTRODUCTION

Fast food culture is an emerging trend among the younger generation. The ready availability, taste, low cost, marketing strategies and peer pressure make them popular with children. Fast food restaurants are primed to maximize the speed, efficiency and conformity. The menu is kept limited and standardized essentially to minimize the waiting time so that the customers eat quickly and leave. This perspective delineates the emerging fast food culture in India, its impact on children and strategies to counter it. Fast foods are widely available in schools through variety of outlets. Cafeterias at the schools offer sodas, cold drinks, chips and many other foods of low nutritional value. Sale of junk foods in school cafeteria often competes with more nutritious school lunch schemes.

On a typical day that fast food is eaten, children consume substantially more total energy and have worse dietary quality compared with a typical day without fast food. There are much greater side effects of fast food and people are unaware of its ill consequences. It can tend to many detrimental diseases. Prolonged use of fast food is also a cause of health problems, obesity, indigestion problem and high cholesterol. Fast food companies are targeting kids and youngster through great promotion strategies, delicious recipes and attractive advertisement.

There are much greater side effects of fast food and people are unaware of its ill consequences. Chubbiness, increase

in cholesterol levels, dietary deficiencies, cardiac disorders, loss of muscle mass, depression, sexual dysfunction, asthma, strokes, type 2 diabetes, cancer (kidney / uterine / colon / breast / esophagus), liver disease, cancer and cardiovascular diseases can all be caused by eating fast food on a regular basis.

Fast foods have high level of fat and sugars that are not only unhealthy but addictive and that creates a vicious cycle making it hard for children to choose healthy food. High content of trans fat in commercially available fast foods predispose children to risk of future heart diseases.

OBJECTIVES:-

1-To study the effect of fast food consumption on the health of school going children(9-13). 2-To know about the health status of school going children(9-13).

Design:-

A study was conducted recruiting school going children.

Schools were selected from the Shamli district, Uttar Pradesh.

Setting and Participants:-

A total of 100 school going children were selected randomly. A total of 100 students were selected from the five school of Shamli district between the age group of 9-13 year. The samples were selected randomly from different schools.

METHODOLOGY

Tool:-

Questionnaire method: - The schedule was used to collect the information on general profile and use of BMI(Body Mass Index) of school going children. Pilot study was conducted to assess reliability and validity of the questionnaire. The self made questionnaire was developed.

Statistical analysis: SPSS version 20 was used to draw meaningful inferences from the collected raw data.

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Operational definition- obese children- by use of BMI Among 10 year of category 2(28.5%) respondent were found level 1 obese, 2(28.5%) respondent were found level 2 obese and 3(42.8%) respondents were found level 3 obese. Among 11 year of age category 7(30.4%) respondents were found level 1 obese, 6(26.0%) respondents were found level 2 obese and 2 (8.6%) respondents were found level 3 obese. Among 12 year of age 1(9.0%) respondents were found level 1 obese, 4(36.3%) respondents were found under level 2 obese. Among 13 year of age category 12(33.3) respondents were found under level 1 obese, 5(13.8%) respondent were found obese level 2 and 3(8.3%) respondent were found level 3 obese.

RESULTS AND DISCUSSION

The data on sample characteristics were analyzed using descriptive statistics and presented in term of frequency, percentage. The data obtained from sample are presented in term of Age.

 $\begin{tabular}{ll} \textbf{Table .1: Distribution of respondent}\\ according to sex \end{tabular}$

Attribute (Sex)	Frequency (%)				
Male	56	56%			
Female	44	44%			
Total	100	100%			

Note: - figures in parenthesis indicate percentage

The result furnished in table 1. Indicates that majorities 56% of the respondent sample were male and 44% respondent sample were female in the age group of 9-13year.

Table. 2 Distribution of the respondent according to health status of school going children between the age 9-13.

WHO standard measure of BMI

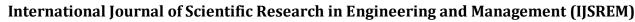
	Category										
Age	Normal		Over weight				Obese level 2		Obese level 3		
	18.50-		>25.00-29.00		30.00-34.99		35.00-		>40.00		
range	24.99						39.99				
– kg/	N	%	N	%	N	%	N	%	N	%	
m^2											
9	_		_		_		1	(100%			
year)			
10	_		_		2	(28.5%	2	(28.5	3	(42.8	
year)		%)		%)	
11	_		8	(34.7	7	(30.4%	6	(26.0	2	(8.6	
year				%))		%)		%)	
12	2	(18	4	(36.3	1	(9.0%)	4	(36.3			
year		.8		%)				%)			
		%)									
13	4	(11	12	(33.3)	12	(33.3%	5	(13.8	3	(8.3)	
year		.1 %))		%)		%)	

Note: - figures in parenthesis indicate percentage

The above table. 2. Shows the BMI (Body Mass Index) of school going children by WHO standard measure values. Among 9 year of age category only 1(100%) respondent was found belonging to obese level 2 where as normal, overweight, obese level 1 and obese level 3 categories were found nil. Among 10 year of category 2(28.5%)respondent were found level 1 obese, 2(28.5%) respondent were found level 2 obese and 3(42.8%) respondents were found level 3 obese where as normal and overweight categories were found nil . Among 11 year of age category 8(34.7%) respondents were found level overweight, 7(30.4%) respondents were found level 1 obese, 6(26.0%) respondents were found level 2 obese and 2 (8.6%)respondents were found level 3 obese where as normal category were found nil. Among 12 year of age category 2(18.8%) respondents were found normal category, 4(36.3%) respondents were found overweight, 1(9.0%) respondents were found level 1 obese, 4(36.3%)respondents were found under level 2 obese whereas level 4 obese category were found nil. Among 13 year of age category 4(11.1%) respondents were found normal category, 12(33.3%) respondents were found over weight, 12(33.3) respondents were found under level 1 obese, 5(13.8%) respondent were found obese level 2 and 3(8.3%) respondent were found level 3 obese.

DISCUSSION

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Fast food products are often rumored to cause a variety of health problems. Ingredients that are artificial, high in sugar or fat are not meant to be eaten on a regular basis. Consuming these ingredients regularly can lead to health issues including heart disease, diabetes and cancers. Fast food is convenient and tasty though it prepared with low nourishing or unhealthy ingredients. In this study Among 10 year 42.8% of respondents were found obese level 3. Among 11 year 8.6% of respondents were found obese level 3. Among 12 year 36.3% respondents were found obese level 2. Among 13 year 8.3% respondents were found obese level 3. Another finding related to this study was that outside the fast food restaurant, fast food consumers at Western diets, which might have stronger associations with overweight/obesity and poor dietary outcomes than fast food consumption itself.

CONCLUSION

Junk food can be appealing for a variety of reasons, including convenience, price and taste. For children, who do not always understand the health consequences of their eating habits, fast food may appear especially appetizing. However, regularly consuming fattening junk food can be addictive for children and lead to complications like obesity, chronic illness, low self-esteem and even depression, as well as affecting how they perform in school and extracurricular activities.

This study found that among 10 year 42.8% children were found obese level 3 rather than other age group. Parents must play their part by providing healthy foods in the home and encouraging physical activity by limiting their children's recreational television, video game, and computer time to less than two hours a day, serves at least five servings of fruits and vegetables daily.

RECOMMANDATION

For further studies, it would be worthy for consideration to look at the effect of improve opportunities for children to engage in physical activities and eat a healthy diet. Are the gender issues affecting the children? Further research could also focus on awareness of mothers about the nutritional status for her children to prevent from obesity and other disease occurs due to over consumption of fast food.

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