

A Study on the Effect of Eating Behaviour on Packed Lunches Among Pre-Adolescents

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Publication Date: 2026/04/03

Abstract: Pre-adolescent eating behaviour is a Key component of nutrition, health and long-term Diets. This paper will discuss the eating behaviour of children aged between 9 and 12 years and the consideration of factors that affect their food choices, food preferences and meal practices. The research design was descriptive and primary data were gathered using a structured questionnaire. Convenient sampling was used to pick out 100 students belonging to Pallavaram and Chromepet. The questionnaire was the issue of food preferences of children, how taste influences the adoption of more nutritious food options, how fast children ate, whether they enjoyed their meal or not, and whether they ate mindfully. Results suggest that eating behaviour of children is significantly affected by taste, familiarity as well as pleasure of food. Children who reflected on their eating habits and spent ample time to eat their meal were better placed to enjoy their food experiences and were more willing to explore other foods. Conversely, selective food consumption and low inclination towards some foods were linked with inadequate dietary uptake and resistance to take up new food products. The findings also indicate that exposure to variety of foods and to appealing meals, in taste and appearance, may have a positive effect on healthy eating behaviour. These results indicate the importance of considering both sensory attractiveness and behaviour involvement in the context of addressing eating behaviour in pre-adolescent children. Promotion of mindful eating, slow the introduction of new foods, and the provision of a wide selections of attractive and healthful choices may aid in the development of positive eating habits, thus promoting greater nutrition and health results throughout the pre-adolescence period.

Keywords: *Eating Behaviour, Pre-Adolescent Nutrition, Dietary Preferences, Mindful Eating, Fruit And Vegetable Intake, Taste Influence.*

How to Cite: S. Mahalakshmi; Syed Suha A. (2026) A Study on the Effect of Eating Behaviour on Packed Lunches Among Pre-Adolescents. *International Journal of Innovative Science and Research Technology*, 11(3), 3018-3025.
<https://doi.org/10.38124/ijisrt/26mar1621>

I. INTRODUCTION

Pre-adolescence is the key period of development that is marked by physical, psychological, and social changes that are very rapid and affect Dietary needs and eating behavior significantly. Environmental as well as individual factors determine eating behavior. Biological growth and psychological factors such as food preferences are individual influences whereas family, peer groups, school, and other external societal subjects like media and culture are examples of environmental influences (Story et al., 2002).

Children the pre-adolescent age group (9-12 years) become more and more independent in their choice of foods and more and more affected by the external environments. Their diet is largely influenced by family traditions, peer influence and schooling (Birch and Fisher, 1998; Story et al., 2002). Besides this, media exposure and alkaltering food

environments also play a role in contributing to the transformation of traditional diets to the more westernized style of eating (Story et al., 2002).

The unhealthy eating habits, including meal skipping, snacking, eating out, and eating fast foods are widely prevalent among children and adolescents (Yannakoulia et al., 2004). Such behaviors have the unwanted effects of influencing nutritional status and which may result in deficiencies at this critical growth stage (Sawaya et al., 2004). Eating habits developed in the pre-adolescent stage can be carried down to later stages in life and put one at risk of becoming overweight and obese (Neumark-Sztainer et al., 2006).

Despite the fact that body image issues gain prominence at the adolescence stage, the development of early attitudes towards food and eating behavior starts at pre-adolescence

stage. The age, gender, family, peer influence, and the socio-cultural context are important elements that influence children into eating habits and perceptions (Birch and Fisher, 1998; Neumark-Sztainer et al., 2006).

It is important to understand eating behavior in pre-adolescence period because this period develops the basis of future dietary habits and the health outcomes. With the identification of the unhealthy eating habits and influencing factors at an early stage, it is possible to develop effective interventions that will lead to the establishment of healthy eating habits in children.

➤ *Early Childhood Appetitive Traits and Eating Behaviour*

In a longitudinal cohort study, Derks et al. (2024) studied the relationship between early childhood appetitive traits and eating disorder symptoms in adolescence in the Netherlands and the UK. Participants in the generation r and Gemini cohort were also part of the study, with appetitive traits measured at age 4-5 years and eating disorder symptoms measured at age 12-14 years. The research discovered that increased food responsiveness also enhanced the risk of binge eating, emotional eating and other disordered eating behaviors, whereas food avoidance characteristics decreased these risks. The researchers found that early appetitive traits are relevant risk or protective factors of eating disorders. Wardle, et al. (2001) studied eating habits and food preferences in children with behavioral measurement instruments. The researchers discovered that food responsiveness, emotional eating, and satiety responsiveness were important traits affecting children's food consumption. The results revealed an association between these eating styles and body weight and obesity risk. The researchers came to the conclusion that personal variations in diet contribute to the emergence of obesity.

➤ *Genetic and Developmental Influences on Eating Behaviour*

In a study, Birch and Fisher (1998) examined the issue of development of eating behaviors in children with regard to both genetic and environmental factors. Results revealed that children possess intrinsic tastes and grow up to acquire eating habits based on how parents feed them. Too much parental control was linked with ineffective self-regulation and liking bad food. The research found that children are influenced in their eating patterns by both genetic predispositions and family environment. A cross-developmental study (1990) was conducted to investigate eating habits of children and adolescents through maternal interview. Six eating behaviors were examined, and two patterns were found: problem meals and pickiness. Pickiness was realized to be prevalent, whilst problem meals were less common. Other problems like food avoidance and eating disorder behaviors were also noted. The research also found that the early eating behaviors could be associated with subsequent eating-related issues. To investigate eating self-regulation development in children and its effects on subsequent eating behavior, Savage et al. (2007) carried out a study. The analysis pointed to the fact that children are born with a natural capacity to plan food consumption depending on hunger and satiety signals. But this natural regulation can be interfered with by

environmental factors especially the parental feeding practices. The results indicated restrictive feeding habits were related to overeating and preference to restricted foods. The researchers arrived at the conclusion that empowering children to self-regulate their eating is a key instrument in preventing unhealthy eating habits and obesity.

➤ *Parental and Family Influence on Eating Behaviour*

Ventura and Birch (2008) conducted a review of the impact of parental influence on children eating behavior. The researchers also reported that parenting styles, feeding styles, and the food environment at home had a powerful effect on food preferences and intake by children. The practice of restrictive feeding was linked to overeating and consumption of foods rich in energy. The researchers has come to the conclusion that early parental effect is crucial to the development of long-term eating behavior. Patrick and Nicklas (2005) surveyed the issues that affected eating habits among children and adolescents. The researchers pointed to the importance of family, peers, and environmental factors in the influence of dietary behavior. Results indicated that parental modeling, access to nutritious food and social environment have high influence on food selection. The researchers concluded that social and environmental factors are significant determinants of healthy eating behavior. The study by Loth et al., (2013), aimed at exploring the relationship between family meals and adolescent eating behavior. The researchers established that eating together as a family was linked to better nutritional intake, such as an increase in fruit and vegetable consumption as well as consumption of vital nutrients. Also, teenagers who attended frequent family meals had reduced incidences of disordered eating habits. The results also revealed that a favorable mealtime atmosphere, such as parental support and communication is important in influencing healthy eating behavior. The researchers concluded that family meals are a protective factor against poor dietary habits in young people. In the study, Pearson et al. (2009) aimed at determining the effects of family and peer on the consumption of fruit and vegetables among adolescents. The research indicated that parental modeling and peer modeling are both important in dietary behavior. They found that the more their parents and friends were healthy eaters, the more likely the adolescents were to eat fruits and vegetables. Also, the availability and accessibility of healthy foods and homes were noted to be significant determinants. The research determined that the family and peer environment are important in encouraging healthy eating in adolescents.

➤ *Peer Influence and Social Norms in Eating Behaviour*

Ragelienė and Grunhøj (2020) aimed to study the healthy eating behavior of preadolescents through a social norms approach. This research was devoted to peer pressure and social order in determining food preferences. The results demonstrated that peer approval, encouragement, and perceived behaviors play an important role in teenage eating habits, especially in improving intake of healthy foods. It was concluded in the study that social norms are important in eating behavior but the mechanisms that underlie them need to be examined further. Ragelienė and Grunhøj (2020) extended the study on peer influence on eating behavior of

adolescents. This research has discovered that teenagers are more likely to engage in the same eating habits as their peers because of social norms and a desire to be accepted. In some studies, however, there were inconsistent results. The researchers found that peer influence is considerable, but mechanisms of it are not clear.

➤ *Environmental and Societal Influences on Eating Behaviour*

Story et al. (2002) examined environmental influences on adolescent eating behavior. The study highlighted the impact of social environment, media, and school settings on dietary habits. The findings showed that availability and accessibility of food, along with peer influence, significantly affect adolescents' food choices. The study concluded that multiple environmental factors interact to shape eating behavior.

Story et al. (2002) conducted a study to examine the environmental influences on adolescent eating behavior, focusing on social, physical, and macro-level factors. The study highlighted that adolescents' food choices are not only shaped by personal preferences but also by family, peers, school environment, and media exposure. The findings showed that easy availability of unhealthy foods, peer influence, and advertising significantly contribute to poor dietary habits. Additionally, social settings such as schools and fast-food environments were found to encourage increased consumption of energy-dense foods. The study concluded that adolescent eating behavior is multidimensional and influenced by a complex interaction of environmental and social factors, indicating the need for comprehensive interventions.

➤ *Psychological and Emotional Factors in Eating Behaviour*

Fitzgerald et al. (2010) conducted a study to explore emotional and psychological factors influencing eating behavior in adolescents. The study emphasized that stress, emotions, and body image concerns significantly affect food choices. The findings showed that adolescents experiencing stress or negative emotions were more likely to engage in unhealthy eating patterns, such as overeating or consuming high-fat and sugary foods. The study concluded that emotional regulation and mental health play an important role in shaping eating behavior and should be considered in interventions.

➤ *Nutrition Knowledge and Behavioural Skills*

Contento et al. (2006) conducted a study to explore the role of nutrition education and psychosocial factors in shaping adolescents' eating behavior. The study emphasized the importance of knowledge, attitudes, and self-efficacy in determining healthy food choices. The findings showed that adolescents with higher nutrition knowledge and confidence in their ability to make healthy choices were more likely to consume fruits and vegetables. Furthermore, behavioral skills and motivation were identified as key components influencing dietary behavior. The study concluded that effective nutrition education programs should focus not only

on knowledge but also on building skills and self-efficacy to promote long-term healthy eating habits.

II. MATERIALS AND METHODS

➤ *Research Design*

The research design used in the current study was descriptive survey research since it was in this way that the eating behaviour patterns of the pre-adolescent children could be assessed systematically and the variation on the behaviour patterns with respect to the age group could be addressed. The design was deemed to be adequate since it helps to obtain detailed data on a specific population and enables identification of trends, patterns, and relationships in the data without any manipulation of any variables.

➤ *Study Area*

This was done in the selected residential and school-based areas in Pallavaram and Chromepet, which are sub urban areas with a diverse population. These locations have been selected to make them accessible to the participants and to gain a representative insight into the eating patterns of children with different socio-demographic backgrounds.

➤ *Sample Size and Method of Sampling*

One hundred pre-adolescent children aged between 9-12 years were used in the study. A convenience method of sampling was used to select the participants, depending on their availability and the willingness to participate. Informed consent was obtained before parents or guardians were included in the study and this made the study voluntary and ethically proper.

➤ *Pilot Study*

A pilot study was carried out on 50 children of the same age group before administration of the main study to assess the validity and reliability of the research instrument used. The pilot study served to determine ambiguities and inconsistencies as well as certain problems in comprehending the questionnaire. Based on the feedback and responses received, the necessary changes and improvements were also implemented to make the data collection tool more clear, more structured, and effective in general.

➤ *Data Collection Tool*

A structured questionnaire was used to gather the data as the questionnaire was created with the intention of identifying different dimensions of eating behaviour among pre-adolescent children. The questionnaire consisted of various kinds of measurement scales to be sure that the data collection was complete:

- Nominal scale was applied in categorizing data like gender and food tastes.
- Ordinal scale The responses were ranked in the ordinal scale in terms of frequency or degree (e.g., frequency of consuming some foods).
- Ratio scale was employed to gather numerical data in terms of age and quantity-related data.

The questionnaire was distributed with the help of Google Forms, and the process of online data collection was

easy and efficient. The approach also guaranteed greater accessibility as well as convenience among the participants.

➤ *Data Validation*

The data gathered underwent thorough examination, checking and verification to be accurate, consistent, and complete. Any unfinished or incoherent responses were coded and excluded in the final analysis to proceed with the quality and reliability of the dataset.

➤ *Statistical Analysis*

The data were found to be valid and analysed using the right statistical methods. Descriptive statistics was used to summarize and describe the data and included percentages, frequencies and mean values. Besides, Analysis of Variance (ANOVA) has been used to establish whether there were statistically significant differences in eating behaviour patterns among children of various ages.

➤ *Data Interpretation*

Analysis data categories were provided in a logical format as a table and a graphical display in the form of charts that enabled easier observation of the results and their interpretation.

➤ *Ethical Considerations*

Each and every ethical principle was respected during the study. The participants were kept confidential and anonymous and no personal information was revealed. The involvement in the study was voluntary, and the participants were free to pull out at any point in time without facing any penalty. Ethical compliance was ensured through the parental consent who were consulted before data collection.

III. RESULTS AND DISCUSSION

This paper has examined eating behaviour pattern of pre-adolescent children using descriptive statistics and ANOVA one way. These results are discussed regarding key behavioural dimensions.

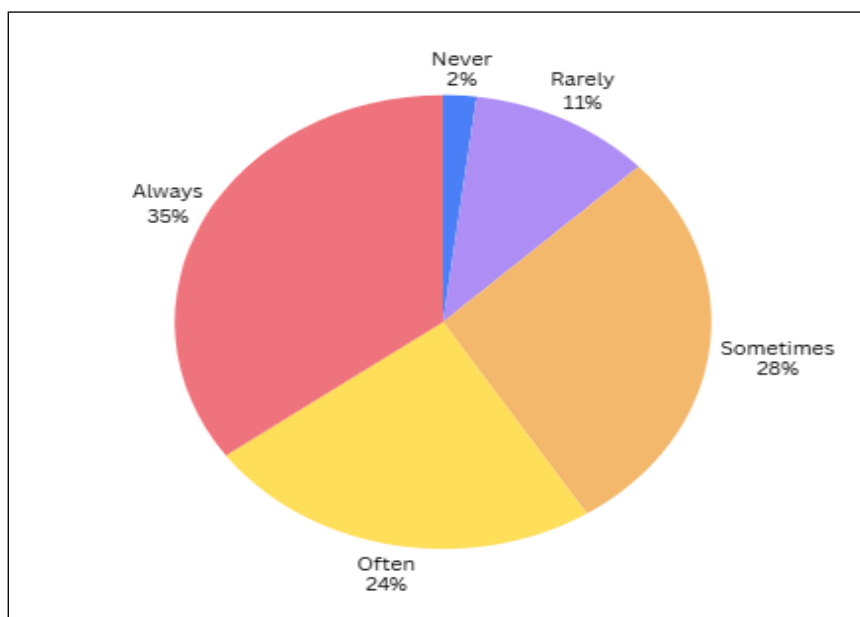


Fig 1. Distribution of Pre - Adolescent's Eating Habits

Table 1. Distribution of Pre - Adolescent's Eating Habits

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	2	2.0	2.0	2.0
	Rarely	11	11.0	11.0	13.0
	Sometimes	28	28.0	28.0	41.0
	Often	24	24.0	24.0	65.0
	Always	35	35.0	35.0	100.0
	Total	100	100.0	100.0	

The results revealed that the majority of children displayed a positive eating behaviour particularly in eating slowly and enjoying eating. Only a small proportion of respondents stated that they never (2 percent) or regularly (24 percent) take time to enjoy their meal, meaning that mindful eating behaviour is common among more than half of the respondents. Also 28 per cent of children reported that they too participated in this behaviour sometimes showing medium awareness. This small proportion reduced only to a slight degree the less pleasant habits, 11 never, 2 often, ate.

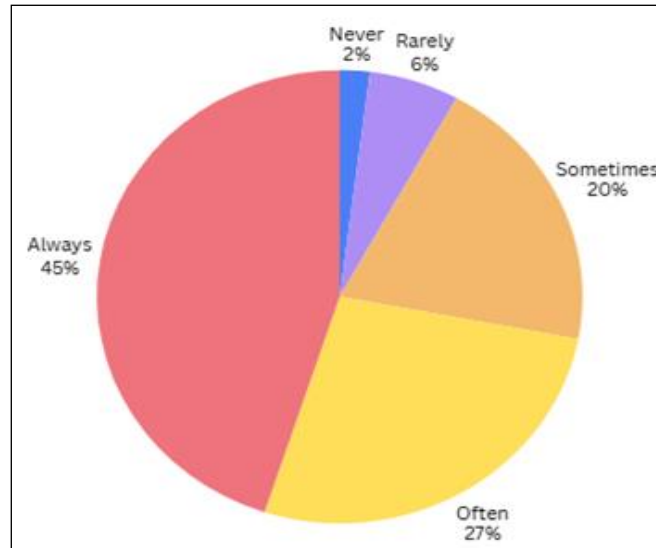


Fig 2. Distribution of Social Eating Behaviour Among Pre – adolescents

Table 2. Frequency Distribution of Social Eating Behaviour Among Pre – adolescents

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	2	2.0	2.0	2.0
	Rarely	6	6.0	6.0	8.0
	Sometimes	20	20.0	20.0	28.0
	Often	27	27.0	27.0	55.0
	Always	45	45.0	45.0	100.0
	Total	100	100.0	100.0	

Regarding social eating behaviour, the study found out that eating lunch together is highly common among children in their pre-adolescent age. A great deal of peer interaction and social bonding of the mealtimes is seen since a significant percentage (45) of participants reported that they always (45) or frequently (27) share their lunch. When asked about the occasionality of sharing, an approximation of 20 percent reported having occasionally shared but a small percentage reported having limited interaction with this behaviour. It implies that food sharing is a communally acknowledged and commonly used phenomenon and it is capable of affecting the social development of children and their relationship with peers positively.

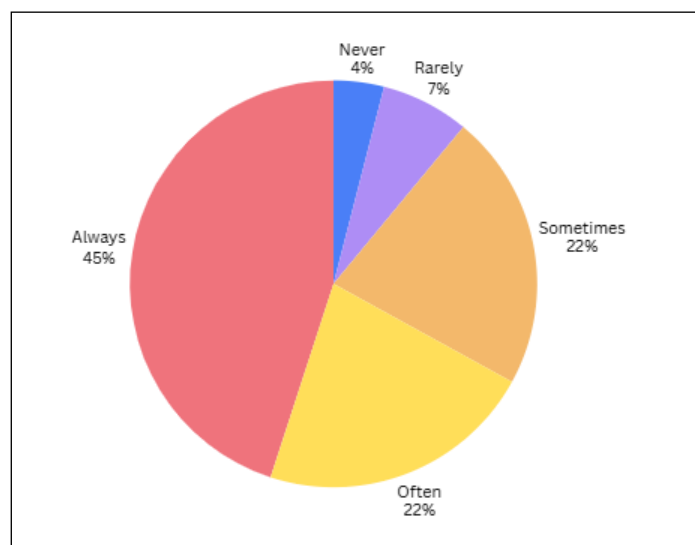


Fig 3. Distribution of the Influence of Food Preference on Eating Quantity

Table 3. Frequency Distribution of the Influence of Food Preference on Eating Quantity

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	4	4.0	4.0	4.0
	Rarely	7	7.0	7.0	11.0
	Sometimes	22	22.0	22.0	33.0
	Often	22	22.0	22.0	55.0
	Always	45	45.0	45.0	100.0
	Total	100	100.0	100.0	

The outcomes also revealed the influence of the food preference on the quantity of food to be eaten. A big percentage of children (45) answered that they eat more; always, often, sometimes, never. Besides, 22 percent said sometimes which is inconsistent. The number of those people who said that they had been influenced little is very low (a small percentage). This will be a good sign that food preference plays a major role in food consumption by children. This behaviour may lead to an increase in the amount of consumption of preferred food in which it may be positive or negative based on the type of food one consumes.

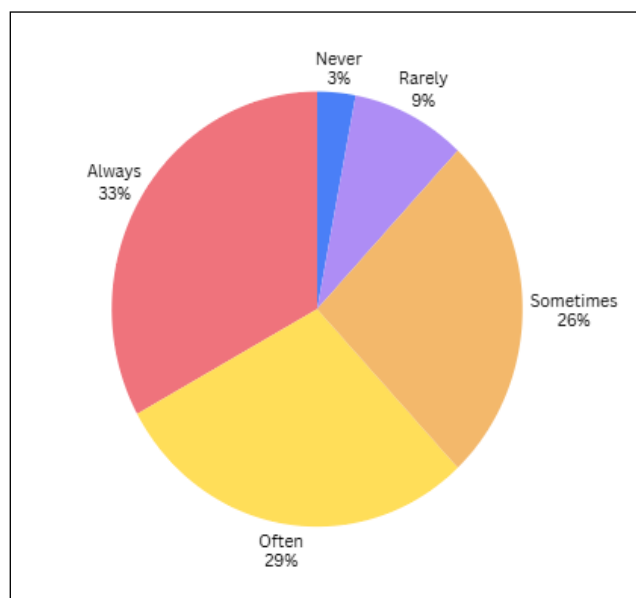


Fig 4. Distribution of Meal Completion Behaviour During School Lunch

Table 4. Frequency Distribution of Meal Completion Behaviour During School Lunch

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Never	3	3.0	3.0	3.0
	Rarely	9	9.0	9.0	12.0
	Sometimes	26	26.0	26.0	38.0
	Often	29	29.0	29.0	67.0
	Always	33	33.0	33.0	100.0
	Total	100	100.0	100.0	

In as far as the intake of what is served in the school lunch is concerned the findings gave a majority of the children as likely to consume whatever is served to them. A quarter of them said they always and a third said often ate their meals with 26 percent of them sometimes doing it. The percentage was very low to show that they do not or hardly do their meals. According to the results, majority of children share the same meal completion behaviour which means good appetite, acceptance of food or well-organised eating habits at school. Besides, the result of the one-way ANOVA revealed that the difference in the eating behaviour of the various age groups was found to be statistically significant ($F(3, 96) = 4.483, p = 0.005$). The p-value does not exceed the significance level, 0.05, hence it did not accept the null hypothesis. It means that

as the age of pre-adolescent children grows, so do the eating behavioural patterns change significantly. This is attributable to the fact that there is developmental variation, increasing independence, and that the preference of food and social factors vary as the children grow older. Overall, the research findings show that the positive eating behaviours, including mindful eating, clearing of meal, and sharing of food tend to be positive in pre-adolescent children. In the meantime, the way they eat is also determined by the factors such as food preference and age. These results indicate that proper eating habits should be inculcated at this stage of life to ensure that the nutritional health of such a population can be ensured in the long-term.

IV. CONCLUSION

The research found out that majority of pre-adolescent children exhibit positive eating behaviours such as eating slowly, liking meals, sharing lunch with other children and eating school meals. These behaviours show that there is an overall health and social interactive eating behaviour amongst the children.

The results were also found to indicate that food preference has a significant impact on food intake with many children usually eating more when their favourite food is served. Also, the ANOVA findings revealed a strong difference between eating behaviour among the age categories that eating behaviour varies with the age of a child.

In general, the research presents the significant role of healthy nutrition and education at the pre-adolescent age in order to encourage healthy development and future health.

ACKNOWLEDGEMENT

This work was supported by the scheme of Minor Research Project grants from Shrimathi Devkunvar Nanalal Bhatt Vaishnav College for Women, Chrompet, Chennai to Mrs S. Mahalakshmi (Grant No.25YRPE025)

REFERENCES

- [1]. Berge, J. M., MacLehose, R. F., Larson, N., Laska, M., & Neumark-Sztainer, D. (2016). Family Food Preparation and Its Effects on Adolescent Dietary Quality and Eating Patterns. *The Journal of adolescent health: official publication of the Society for Adolescent Medicine*, 59(5), 530–536. <https://doi.org/10.1016/j.jadohealth.2016.06.007>
- [2]. Birch, L. L. (1999). Development of food preferences. *Annual Review of Nutrition*, 19, 41–62. <https://doi.org/10.1146/annurev.nutr.19.1.41>
- [3]. Birch, L. L., & Fisher, J. O. (1998). Development of eating behaviors among children and adolescents. *Pediatrics*, 101(3), 539–549.
- [4]. Birch, L. L., & Fisher, J. O. (1998). Development of eating behaviors among children and adolescents. *Pediatrics*, 101(3), 539–549.
- [5]. Brown, R., & Ogden, J. (2004). Children's eating attitudes and behaviour: A study of the modelling and control theories of parental influence. *Health Education Research*, 19(3), 261–271. <https://doi.org/10.1093/her/cyg040>
- [6]. Contento, I. R., Williams, S. S., Michela, J. L., & Franklin, A. B. (2006). Understanding the food choice process of adolescents in the context of family and friends. *Journal of Adolescent Health*, 38(5), 575–582. <https://doi.org/10.1016/j.jadohealth.2005.05.025>
- [7]. Fitzgerald, A., Heary, C., Nixon, E., & Kelly, C. (2010). Factors influencing the food choices of Irish children and adolescents: A qualitative investigation. *Health Promotion International*, 25(3), 289–298. <https://doi.org/10.1093/heapro/daq021>
- [8]. Loth, K. A., MacLehose, R. F., Fulkerson, J. A., Crow, S., & Neumark-Sztainer, D. (2013). Food-related parenting practices and adolescent weight and weight-related behaviors. *Pediatrics*, 131(5), e1443–e1450. <https://doi.org/10.1542/peds.2012-3073>
- [9]. Neumark-Sztainer, D., Wall, M., Larson, N. I., Eisenberg, M. E., & Loth, K. (2006). Dieting and disordered eating behaviors from adolescence to young adulthood. *Journal of the American Dietetic Association*, 106(4), 559–568.
- [10]. Neumark-Sztainer, D., Wall, M., Story, M., & Fulkerson, J. A. (2004). Are family meal patterns associated with disordered eating behaviors among adolescents? *Journal of Adolescent Health*, 35(5), 350–359. <https://doi.org/10.1016/j.jadohealth.2004.01.004>
- [11]. Patrick, H., & Nicklas, T. A. (2005). A review of family and social determinants of children's eating patterns and diet quality. *Journal of the American College of Nutrition*, 24(2), 83–92. <https://doi.org/10.1080/07315724.2005.10719448>
- [12]. Pearson, N., Biddle, S. J. H., & Gorely, T. (2009). Family correlates of fruit and vegetable consumption in children and adolescents: A systematic review. *Public Health Nutrition*, 12(2), 267–283. <https://doi.org/10.1017/S1368980008002589>
- [13]. Ragelienė, T., & Grønhoj, A. (2020). The influence of peers' and siblings' on children's and adolescents' healthy eating behavior. *BMC Public Health*, 20(1), 1–12. <https://doi.org/10.1186/s12889-020-09139-5>
- [14]. Rolls, B. J., Engell, D., & Birch, L. L. (2000). Serving portion size influences food intake in children. *The American Journal of Clinical Nutrition*, 71(5), 123–130. <https://doi.org/10.1093/ajcn/71.5.123>
- [15]. Savage, J. S., Fisher, J. O., & Birch, L. L. (2007). Parental influence on eating behavior: Conception to adolescence. *The Journal of Law, Medicine & Ethics*, 35(1), 22–34. <https://doi.org/10.1111/j.1748-720X.2007.00111.x>
- [16]. Sawaya, A. L., Martins, P. A., Hoffman, D., & Roberts, S. B. (2004). The link between childhood undernutrition and risk of chronic diseases in adulthood. *European Journal of Clinical Nutrition*, 58(1), S34–S39.
- [17]. Scaglioni, S., Salvioni, M., & Galimberti, C. (2008). Influence of parental attitudes in the development of children eating behaviour. *British Journal of Nutrition*, 99(S1), S22–S25. <https://doi.org/10.1017/S0007114508892471>
- [18]. Story, M., Neumark-Sztainer, D., & French, S. (2002). Individual and environmental influences on adolescent eating behaviors. *Journal of the American Dietetic Association*, 102(3), S40–S51.
- [19]. Story, M., Neumark-Sztainer, D., & French, S. (2002). Individual and environmental influences on adolescent eating behaviors. *Journal of the American Dietetic Association*, 102(3), S40–S51. [https://doi.org/10.1016/S0002-8223\(02\)90421-9](https://doi.org/10.1016/S0002-8223(02)90421-9)

- [20]. Szczepańska, E., Janota, B., Wlazło, M. & Czapla, M. (2021). Eating behaviours, the frequency of consumption of selected food products, and selected elements of lifestyle among young dancers. *Roczniki Państwowego Zakładu Higieny / Annals of the National Institute of Hygiene*, 72(1), 67–76. <https://doi.org/10.32394/rpzh.2021.0151>
- [21]. Ventura, A. K., & Birch, L. L. (2008). Does parenting affect children's eating and weight status? *International Journal of Behavioral Nutrition and Physical Activity*, 5(1), 1–12. <https://doi.org/10.1186/1479-5868-5-15>
- [22]. Wardle, J., Haase, A. M., & Steptoe, A. (2006). Body image and weight control in young adults: International comparisons in university students. *International Journal of Obesity*, 30(4), 644–651. <https://doi.org/10.1038/sj.ijo.0803050>
- [23]. Yannakoulia, M., Karayiannis, D., Terzidou, M., Kokkevi, A., & Sidossis, L. S. (2004). Nutrition-related habits of Greek adolescents. *European Journal of Clinical Nutrition*, 58(4), 580–586.