Dear Editor

Poor dietary habits in children and adolescents may impose some negative health impacts later in life. To promote healthy eating and dietary behaviors through effective dietary interventions for children and adolescents, it is necessary to determine the pivotal factors involved in food intake and dietary behaviors in this population. Self-efficacy, health outcome expectations, intention, and knowledge play the role as the most important psychosocial constructs correlating youth dietary behaviors. However, findings from youth studies regarding the correlates of social-cognitive factors with food intake are still controversial. In this editorial, we discussed the basic social cognitive factors associated with dietary behaviors in children and adolescents.

Unhealthy eating habits may be tracked from childhood into adulthood and may impose some negative health impacts later in life (1). To promote healthy eating and dietary behaviors through effective dietary interventions for children and adolescents, it is necessary to determine the pivotal factors involved in food intake and dietary behaviors in the population. Psychosocial characteristics of youth may influence behavior through mutual interactions between individual and environmental determinants. Self-efficacy, health outcome expectations, intention, and knowledge play the role as the most important psychosocial constructs correlating youth dietary behaviors (2).

The study that investigated the psychosocial correlates of dietary behavior among youth has shown mixed and sometimes relatively convincing findings concerning the associations between the proposed determinants and a wide range of eating behaviors (1). In one of the first studies evaluating the psychosocial factors associated with dietary intake among low-income urban African American youth population, increased scores of intention and self-efficacy showed positive correlates of fruit-vegetable (FV) and fiber intake (2). Along with these findings, self-efficacy was demonstrated to be correlated with higher FV intake and greater barriers were associated with less FV intake in both minority groups of African-American and Hispanic and non-minority groups of Caucasian high-school students. However, among the ethnic minority group, healthy eating goal setting and perceived benefits of FV intake were illustrated to be positive predictors of 5-a-day
dietary self-efficacy for higher consumption of fruits in Australian secondary school students, adolescent parental influences on adolescent fruit consumption quality features. Indeed, in a cross-sectional study of children’s dietary intake and are also considered to mediate the associations of parental education with explain that family support and social influence may confirm for mean daily servings of FV among low-income urban African American youth. BMC Public Health. 2016;16:872. DOI:10.1186/s12889-016-3499-6. PMID:27558162.

As can be seen, findings from youth studies regarding the correlates of food intake are mixed. In general, most of the studies have suggested individual factors like intention, self-efficacy, and preferences as the strongest determinants of food intake in the population. However, most of the findings are based on cross-sectional designed studies and they in large part investigated only the influences of psychosocial factors on FV intake behavior. Therefore, future comprehensive better-designed researches are required to investigate the strong determinants of eating of other food groups and support the available associations.

Acknowledgment
The authors did not receive any fund for this editorial.

Conflict of Interest
None declared.

References


