

PERCEIVED PERSONAL, SOCIAL AND ENVIRONMENTAL BARRIERS TO HEALTHY EATING AND PHYSICAL ACTIVITY AMONG ADOLESCENT SECONDARY SCHOOL STUDENTS.

Mikhail Lutchmedial

Project Supervisor: Dr. Marquitta Webb

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Background: Adolescents are at high risk for Obesity and the Chronic Non-Communicable Diseases which are associated with it. Healthy Eating and Physical Activity levels are directly associated with these diseases.

Objective: This study examined the perceived personal, social and environmental barriers to healthy eating and physical activity among adolescent secondary school students and how these barriers varied according to gender.

Design: In February-March 2013, a total of 618 secondary school students, both male and female, selected via convenient random sampling, completed a self-report survey that included 14 questions on barriers to healthy eating and 11 questions physical activity (relating to personal, social and environmental factors). Demographic data (gender, form and name of school) were also obtained. Statistical analyses were conducted March 2013.

Results: The most common barriers to healthy eating identified by adolescents were ease of access to fast foods, time and taste. The most significant barriers to physical activity reported by adolescents include time, expense, lack of interest and laziness. Specific barriers were also found to affect one gender more than the other. A lack of time to prepare and consume healthy foods was a more significant barrier to healthy eating for females as compared to males ($p = 0.009$). Moreover, a lack of interest in physical activity classes and sports at school was a more significant barrier to physical activity for females than males ($p = 0.000$).

Conclusion: Health promotion strategies aimed at preventing obesity and chronic non-communicable diseases should take into account the specific perceived personal, social and environmental barriers to healthy eating and physical activity encountered by adolescents in this age group. These strategies should focus mainly on environmental and personal barriers. Strategies targeting ease of access to fast foods, time and taste should be considered as it pertains to healthy eating while strategies targeting time, expense, lack of interest and laziness should be considered as it pertains to physical activity. Furthermore, these strategies should be gender focused as significant barriers were shown to affect one gender more than the other.