



## Nutrition Awareness of College Students: Basis In Improving Nutrition Program

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### ABSTRACT

Nutritional awareness is important in the diet, balance of food to eat, self-perception on food choice that can be classified accordingly to what is needed in the body and improves and explains the variance of quality of food that can affect the body and life.

The study is focused on the nutrition awareness of college students as a basis in the improvement of nutrition program, deals on the profile of the respondents as to gender, age, height, weight, religion, and general average, the factors that affect nutrition practices of students in terms of personal concern, home and family, and community/environment which extended to the aforementioned factors affect nutrition practices of the respondents.

Descriptive methods of research and design is utilized in the study since descriptive research is a fact finding method where it tells what exist and it tells the educational phenomena of the study under investigated. The study comprised of One Hundred Fifty (150) respondents only.

Purposive sampling is employed in the study because it is judgmental and convenient to the researcher until it reaches the target number of population under study.

Results show that profile of the respondents contributes to the nutritional awareness in the improvement program of the nutrition. It shows that they are aware on the proper nutrition, yet while they know these facts, they do not consider such factors in their health practices. Home, school, and community are three of the most important agencies that develop awareness on health and nutrition. From these agencies come the personal concern, home and family breeding, and community/environment influences. The support of these agencies directs the individuals on the right choices on nutrition. Different factors play a significant role on the nutrition practices of students. These include their choices, breeding, and environment status. These factors could dictate the eating/nutritional habits and practices of the individuals, and show that health of the students corresponds to their nutrition awareness and practices. Their physical and mental well-being could be attributed on the way that maintains strong and sound body condition.

**Keywords:** *Nutrition Awareness, Nutrition Program, Nutrition Practices, Personal Concern, Home and Family Nutrition, and Community and Environment Nutrition.*

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### INTRODUCTION

It has been said that "health is wealth" and in order to achieve this, individuals should be aware of the nutritional value they intake from time to time. Nutritional awareness is important in the diet, balance of food to eat, self-perception on a food choice that can be classified accordingly to what is needed in the body. Nutritional awareness improves and explains the variance of the quality of food that can affect the body and life. This is mostly addressed to the college students as they start rearing their life and discover the world of food among them. It is a stage where they can experiment with food as part of their life. Nutrition on the part of students plays a vital role for them. It is a challenge for the students to expose the different health issues. Risk of their health can be avoided when there is a health management system on their part in improving their value of life, Roopa, & Williams [1].

On the other hand, good nutrition can maintain good health. Free from any diseases, and maintain good body features. It promotes well-being to overall health. Good nutrition provides better development to health leading to a happy life. Awareness of nutrition and practice in diet adopts a habit toward the promotion of healthy living not only on the part of the students but to all people who are observing diet and nutrition which is effective to diet behavior. Students who have no background and poor knowledge of nutrition can be detrimental to their health, Salama, & Ismael [2].

Furthermore, behavior towards nutrition must be the personal concern of every individual since nutrition education gives background and knowledge on the proper food intake which leads to a healthy lifestyle. It has been said, that it is better to prevent than to repair and regret at the end. Concentrate on a healthy lifestyle that can prolong the life and enjoyment of every individual. Nutritional awareness and personal concern support and provides benefits to healthy living adequately substance to the body, Devries, Willett, & Bonow [3]. Hence, personal concern on nutrition behavior sustains dietary inherent guides in improving the health and nutrition that requires and ensures sustainability in the system of food. With the trends of the environment at present that food is everywhere to which food is enticing due to its sophisticated presentation on the different preservatives that can hamper health. Addressing these issues requires thorough careful and change in the current food system. Nutrition awareness on diet plays an important part in the food industry. This is an opportunity to develop interdisciplinary knowledge on the nutritional awareness program of the government in the society and to address issues on health among them, Rose, Heller, & Roberto [4].

Similarly, home and family contribute to the awareness of nutrition among their siblings. As they prepare food for their children. The proper balance of food must be considered for them because they are for the welfare and well-being of the members of their family. Parents' behaviors toward nutrition awareness intervene and prevention of health problems among their siblings. They should be focused on nutrition activities in skills and development of cooking, planning of the meal-related to their family and home outcomes. Family and home environment food will protect the members of the family, free from any harmful diseases and maintains healthy living among them. This involves personal hygiene and changes in the healthful intake of diets, Fulkerson, et al [5]. A healthy living is compared to a child where they are protected from any harmful diseases from pregnancy to adulthood and even extended into their entire life depends on how they perceive as to their status in life. Planning is important in the nutrition of the family and home. The tendency of poor nutrition will bring to unhealthy living. Supplement in micronutrients provides better outcomes in life. Improvement in diet measures planning and pattern behavior for a healthy lifestyle in reducing the burden to any diseases. Family and home must be alert in planning the diet, food, and nutrition among the members of their family, Stephenson, et al, [6].

Subsequently, community and environment is a factor where nutritional awareness is observed. They contributed to a healthy lifestyle and healthy living among the people in the community as suppliers of food. Environment pollutions and exposures contribute to health increase risks modulated with nutrition and health-protective behaviors. The importance of dissemination in nutritional awareness in the community and environment provides education programs for health issues and problems among them. Motivation on the part of the community and environment will lead them to the proper address of nutrition that will help them survive and maintain their healthy lifestyle despite their socio-economic status in life. Adopting nutritional awareness and behavior modifies the health improvement of the people in the community. It widens, expands, and determines knowledge on the perception of an effective programs in nutrition and planning, Gaetke, et al [7]. Certainly, nutrition engagement emphasizes to the community the increase of the prevention of health problems. Nutrition programs are available at any time in the community because the target goal of the community is to be free from any communicable diseases despite of the living condition of the people in the community level, Kampman, Zongrone, Rawat, & Becquey [8].

### **Statement of the Problem**

The study is focused on the nutrition awareness of college students as a basis in the improvement of the nutrition programs. Specifically, it aims to answer the following questions.

- a) How may the profile of the respondents be described in terms of gender, age, height, weight, religion, and general average?
- b) What are the factors that affect the nutrition practices of students in terms of personal concern, home and family, and community/environment?
- c) How may the aforementioned factors affect the nutrition practices of the respondents?

### **Research Design**

Descriptive methods of research and design are utilized in the study since descriptive research is a fact-finding method where it tells what exists and tells the educational phenomena of the study under-investigated. The design further explains simultaneously the different ways of nutrition awareness of students as the basis for nutrition programs in the curriculum. This is an empirical, interventional, observational, prospective and retrospective, controlled, and uncontrolled type of design. It describes and understands the situation of the study of different variables, Andrade [9].

### **Respondents of the Study**

Students are utilized in the study. They are from different colleges and universities that are part of the nutrition awareness program. They observe the proper nutrition awareness in life. Most of the respondents are from the Hotel and Restaurant Management (HRM) which is timely and relevant for their course. The study comprises of One Hundred Fifty (150) respondents only.

### Sampling Techniques

Purposive sampling is employed in the study because it is judgmental and convenient to the researcher until it reaches the target population under study. It synthesizes the number of studies that undermine a thorough analysis and perform the ability of the samples. It is manageable in achieving the target data to describe the application and development of the nutrition awareness of students as evidence on their study. The purposive sampling approach ensures and helps the representation focus to the objectives and target of the study. It is a kind of sampling the meets the criteria that contributed to strengthening the findings of the study, Ames, Glenton, & Lewin [10].

### Instruments Used in the Study

A self-made questionnaire is utilized in the study. This is appropriate because of the expertise of the researcher as a nutritionist in the Department of Education. This underwent a validation process prior to the floating of the questionnaire. Part 1 consists of the profile of the respondents as to gender, age, height, weight, religion, and general average. Part 2 consists of the factors that affect nutrition practices of students in terms of personal concern, home and family, and community/environment and how may the aforementioned factors affect the nutrition practices of the respondents.

## RESULT, DISCUSSION, ANALYSIS, AND INTERPRETATION

**Table 1.** Profile of the Respondents

<b>Gender</b>	<b>f</b>	<b>%</b>	<b>R</b>
Male	60	40	2
Female	90	60	1
<b>Age</b>			
15-20	49	32.66	2
21-25	60	40.50	1
26-30	28	19.66	3
31-35	13	8.68	4
<b>Height</b>			
5' and below	55	36.66	2
5'01"-5'05"	65	43.33	1
5'06"-6'	25	16.66	3
6'01" and above	5	3.35	4
<b>Weight</b>			
45 kls. and below	20	13.33	5
46-55 kls.	28	19.66	3
56-65 kls.	38	25.33	2
66-75 kls.	45	30	1
75 kls. and above	19	11.68	5
<b>Religion</b>			
Catholic	90	60	1
Iglesia ni Cristo	30	20	2
Seventh-Day Adventist	18	12	3
Others:	12	8	4
<b>Average Grade</b>			
96-100	7	4.6	4
91-95	50	33.33	2
86-90	58	38.67	1
80-85	30	20	3
76-80	5	3.4	5

Table 1 presents the frequency and percentage distribution of the profile of the respondents. Most respondents are female with a frequency of 90 or 60% among them. It is emphasized here that female is more conscious on their health and nutrition awareness. It is satisfaction on their part to have nutritional awareness on their food intake. They develop,

plan, and improve the implementation of inspired food that is nutritious that contributed to a life and a healthy diet, Lee [11]. Moreover, the age bracket belongs to 21-25, with a frequency of 60 or 40.50% among the respondents. At this stage of life the more they are conscious of their nutritional values and awareness of the food intake because of the abnormal changes in their body features. It highlights their age in the assessment of their food intake to have better body features on their nutritional awareness, Yelden, et al [12]. Similarly, the height reveals 5'01-5'05", with a frequency of 65 or 43.33% among the respondents. This shows that students are concerned about their height wherein to maintain a good height, they need to be aware of nutrition awareness to contribute to the improved monitoring of their height. Knowledge adequately on growth and height monitoring on nutritional status is appropriate and needed, Sagoe [13]. Hence, weight is 66-75 kilos with a frequency of 45 or 30% among the respondents. Students here are gaining kilos because of the food intake they have. They are not aware of the nutrition that affects their weight. Orientation, strategies, and awareness of nutrition and prevention weight and management are focused on the health of every individual, Kim, Austin, Subramanian, & Kawachi [14]. Catholic is the more number religion among the respondents with a frequency of 90 or 60% among them. This is the most dominant religion in the country where they can impose proper nutrition awareness on them. An initiative of the religious sector recommends a good nutrition achievement, Abiyinza [15]. Still, the average grade belongs to 86-90, with a frequency of 58 or 39.67% among the respondents. Nutrition awareness contributes to the academic performance of the students. Adherence to nutrition awareness of students promotes their academic performance as well in their mental and physical health status, Antonopoulou, et al [16].

**Table 2.** Factors Affecting Nutrition Practices in Terms of Personal Concern

<b>Indicators</b>	<b>f</b>	<b>%</b>	<b>R</b>
Presentation/Preparation of food	148	98.67	1
Taste, Smell, and Odor	142	94.67	3
Desire for healthy body	139	92.67	5
Knowledge of nutrition	137	91.33	7
Psychological influences	136	90.67	8
Emotional stress	138	92	6
Influence of peers and friends	146	97.33	2
Gender Factor	140	93.33	4

**\*multiple responses**

Table 2 presents the frequency and percentage distribution of the factors affecting nutrition practices in terms of personal concern.

As noted in the table, rank 1 is "Presentation/Preparation of food", with a frequency of 148 or 98.67%. This shows that respondents are much influenced by the preparation and sophisticated presentation regardless of the nutritional content which affects their health. Rank 2 is "Influence of peers and friends", with a frequency of 146 or 97.33% among the respondents. This shows that most of the respondents are being enticed by their friends and peers and as such nutritional awareness is affected too. Rank 3 is "Taste, Smell, and Odor", with a frequency of 142 or 94.67%. Respondents here are affected by features of the food they take, however; they are affected by the nutritional awareness and value of the food they take. The least in rank is "Psychological influences", with a frequency of 136 or 90.67% among the respondents. This is probably the reason why nutritional awareness must be implemented. Poor quality of food increased the risk of diseases. Nutrition education must be the concern of individual person. Providing basic nutrition makes life meaningful, Wright, & Zelman, [17].

**Table 3.** Factors Affecting Nutrition Practices in Terms of Home and Family

<b>Indicators</b>	<b>f</b>	<b>%</b>	<b>R</b>
<b>Parents' Income/Budget</b>			
5,000 and below	15	10	5
5,001-6,000	19	12.67	3
6,001-7,000	17	11.33	4
7,001-8,000	47	31.33	2
8,001 and above	52	34.67	1
<b>Parents' Choice</b>			
Mother	88	58.66	1
Father	62	41.33	2
<b>Parents' Occupation</b>			
Businessmen	48	32	2
Supervisor/Manager	49	32.67	1
Rank and File	22	14.67	4

Laborer	31	20.66	3
<b>Superstitious Belief</b>			
Religious	74	49.33	2
Superstitious	76	50.66	1
<b>Nutritional Awareness</b>			
Selection of Food	75	50	1.5
Allotment of Budget	75	50	1.5

Table 3 presents the frequency and percentage distribution as to factors affecting nutrition practices in terms of home and family.

As shown in the table, “Parents’ Income/Budget” is 8,001 and above, with a frequency of 52 or 34.67% among the respondents, with the sizeable income of the parents, it seems that budgeting on the nutritional food would be hard just to sustain the needs of the family. On the other hand, parents’ choice of food depends on the mothers, with a frequency of 88 or 58.66% among the respondents. Mothers’ respondents here prepare food to sustain and to survive for the family in which nutrition of the food is affected to them. Parents’ Occupation is Supervisor/Manager, with a frequency of 19 or 32.67% among the respondents. Regardless of the occupation, it doesn’t measure the nutritional value of the food they prepare for the members of the family. Superstitious belief is 76 or 50.66% among the respondents. They just trust the luck and belief they have to survive despite the food they eat. Nutritional awareness on the selection of food and allotment of the budget is what they consider with a frequency of 75 or 50% among the respondents. Inappropriate food or nutrition affects the health of the students. Providing adequate nutritional food to individual members of the family establishes healthy habits among them, Abraham, Noriega, & Shin [18].

**Table 4.** Summary of the Factors Affecting Nutrition Practices in Terms of Home and Family

<b>Indicators</b>	<b>f</b>	<b>%</b>	<b>R</b>
Parent’s Income/Budget	150	100	1
Mothers’/Fathers’ Choice	148	98.67	2
Parents’ Occupation	147	98.00	3
Family Religious Belief	130	86.67	6
Superstitious Belief	132	88.00	5
Parents’ Nutritional Awareness	145	96.67	4

Table 4 presents the frequency and percentage distribution on the summary of the factors affecting nutrition practices in terms of home and family.

As observed in the table, rank 1 is “parent’s income and budget”, with a frequency of 150 or 100% among the respondents. This shows that nutrition practices must be observed at home and family in which budget is allocated for their nutritional practices. Rank 2 is “parents’ choice”, with a frequency of 148 or 98.67% among the respondents. Parents’ here wanted to have a good practice of nutrition, however; due to the limited budget that can constraint them to follow the nutritional food procedure. Rank 3 is “parents’ occupation”, with a frequency of 147 or 98% among the respondents. This shows that parents work help to sustain the needs of the members of the family however, due to their sizeable income it affects their nutritional food among their family. The least in rank is “family religious belief”, with a frequency of 130 or 86.67% among the respondents. This shows that they have religious beliefs and rely upon God and mercy for the situation they have in their health despite the limited nutrition values they have in life, Tovar, et al. [19].

**Table 5.** Factors Affecting Nutrition Practices in Terms of Community and Environment

<b>Indicators</b>	<b>f</b>	<b>%</b>	<b>R</b>
Mass Media/Marketing Strategies	148	98.67	3
Cultural/Communities way of life	150	100	1.5
Service of community workers	146	97.33	4
Food pattern	150	100	1.5
Cultural/Ethnic Background	140	93.33	5
Community socioeconomic status	149	99.33	2

Table 5 presents the frequency and percentage distribution of factors affecting nutrition practices in terms of community and environment

As acknowledged in the table, rank 1 is shared by the two indicators which are “Cultural/Communities way of life” and “Food pattern”, with a frequency of 150 or 100% among the respondents. This shows that factors affecting their

nutrition practiced in the community and environment are the food they have and the contribution of the culture in the community as a way of their living. They are used with their system in the community. Nutrition-related to good knowledge influences the health status of quality of living and improves healthy lifestyles, Jeruszka-Bielak, et al. [20]. Rank 2 is “Community socioeconomic status”, with a frequency of 149 or 99.33% among the respondents. This shows that economic and social status plays a role in the nutritional awareness practices of every individual. It examines the positive impact of the nutritional practices and the quality diet of the respondents, Michels, et al. [21]. Rank 3 is “Mass Media/Marketing Strategies”, with a frequency of 148 or 98.68% among the respondents. Influences of media and marketing techniques and strategies contribute to the nutritional awareness of the respondents, Truman, & Elliott [22].

**Table 6. Summary of Factors Affecting Nutrition Practices**

<b>Indicators</b>	<b>f</b>	<b>%</b>	<b>R</b>
Personal concern	140	93.33	3
Home and Family	148	98.66	1
Community and Environment	145	96.66	2

Table 6 presents the frequency and percentage distribution on the summary of the factors affecting nutrition practices.

It is noted that most of the concerned nutrition practices are the “home and family”, with a frequency of 148 or 98.66 % among the respondents. This shows that family and home contribute to the nutrition awareness of the respondents. Likewise with the “community and environment”, with a frequency of 145 or 96.6% among the respondents, in such a way the environment plays a vital factor in nutrition among them. The least in rank is the “personal factors”, with a frequency of 140 or 93.33% among the respondents, Issahaku, & Abdulai [23].

**Table 7. Effects of Nutritional Practices on Health along the Area of Personal Concern**

<b>Indicators</b>	<b>WM</b>	<b>I</b>	<b>R</b>
Cleanliness for the preparation of foods.	<b>4.67</b>	<b>HA</b>	<b>1</b>
Taste, smell, and odor for food when overcooked lost their nutritional content.	<b>4.54</b>	<b>HA</b>	<b>2</b>
Personal desire for healthy body/additive improves the taste and appearance.	<b>4.40</b>	<b>A</b>	<b>3.5</b>
Personal knowledge on nutrition on food and different function and content.	<b>4.40</b>	<b>A</b>	<b>3.5</b>
Food causing allergies and pimples bring to psychological influences.	<b>4.20</b>	<b>A</b>	<b>5.5</b>
Emotional stress to the appearance of food doesn't always relate to nutritional value.	<b>4.20</b>	<b>A</b>	<b>5.5</b>
Influences of peers and friends	<b>3.52</b>	<b>A</b>	<b>7.5</b>
Gender factor desire for food.	<b>3.52</b>	<b>A</b>	<b>7.5</b>
<b>Average Weighted Mean</b>	<b>4.18</b>	<b>A</b>	

Table 7 presents the weighted mean and the corresponding interpretation on the effects of nutritional practices on health along the area of personal concern.

As noted in the table, rank 1 is “Cleanliness for the preparation of foods”, with a weighted mean of 4.67 or Highly Agree. This shows that individuals are concerned in particular about the cleanliness of the food they eat because food safety contributes to their hygiene and health, Aycicek, Oguz, & Karci [24]. Hence, rank 2 is “Taste, smell, and odor for food when overcooked lost its nutritional content”, with a weighted mean of 4.54 or Highly Agree. This is one of the nutritional practices of the respondents about the features of the food they eat that contribute to nutritional content. Healthy food develops exposure to the food intake of individuals, Nekitsing, Hetherington, & Blundell-Birtill [25]. Rank 3 is shared by the two indicators which are “Personal desire for health body/additive improves the taste and appearance” and “Personal knowledge on nutrition on food and different function and content”, with a weighted mean of 4.40 or Agree which shows that respondents have the desire to practice nutritional health and knowledge to food intake. The importance of the food function and content identify the diet and metabolism of the food, Rowland, et al. [26]. The least in rank is shared by the two indicators which are “Influences of peers and friends” and “Gender factor desire for food”, with a weighted mean of 3.52 or Agree. The overall weighted mean is 4.18 or Agree. This shows that most of the foods they have are the suggestions from their friends and peers desire, considering the experiences of their friends and gender peer in exercising their diet, Chung, Ersig, & McCarthy [27].

**Table 8. Effects of Nutritional Practices to Health along with the Area of Home and Family Factors**

<b>Indicators</b>	<b>WM</b>	<b>I</b>	<b>R</b>
Parents' income and budget.	<b>4.90</b>	<b>HA</b>	<b>2.5</b>
Parents' choice of food.	<b>4.90</b>	<b>HA</b>	<b>2.5</b>
Parents' occupation	<b>4.83</b>	<b>HA</b>	<b>4</b>

Religious belief	3.54	A	5.5
Parents' nutritional awareness	4.96	HA	1
Superstitious belief	3.54	A	5.5
<b>Average Weighted Mean</b>	<b>4.45</b>	<b>A</b>	

Table 8 presents the weighted mean and the corresponding interpretation of the effects of nutritional practices on health along the area of home and family factors.

As seen in the table, rank 1 is "Parents' nutritional awareness", with a weighted mean of 4.96 or High Agree. This shows that mothers know best in terms of food preparation for their families. An initiative of parents in promoting meal planning demonstrate their initiative on the nutrition of their children, Fernandez, et al. [28]. Rank 2 is shared by the two indicators which are "Parents' income and budget" and "Parents' choice of food", with a weighted mean of 4.90 or Highly Agree. This shows that nutrition is based on the finances or budget of the parents and their choices of food among their siblings. Income and budget have an impact on the ability of a family to feed, O'Connell, Owen, Padley, Simon, & Brannen [29]. Rank 3 is "Parents' occupation", with a weighted mean of 4.83 or Highly Agree. The stability of parents contributes to the effect of nutritional practices of the respondents on how to improve their health nutrition. Health important issues on nutrition should promote in-home setting, Van de Kolk, et al. [30]. The least in rank is shared by the two indicators which are "Religious belief" and "Superstitious belief", with a weighted mean of 3.54 or Agree. Religious and superstitions have something to do with the nutritional practices in the home and family factors. The overall weighted mean is 4.45 or Agree. It has been accepted here that nutritional practices should start at home and family as contributory factors to the health awareness of every individual.

**Table 9.** Effects of Nutritional Practices to Health along with the Area of Environment and Community

<b>Indicators</b>	<b>WM</b>	<b>I</b>	<b>R</b>
Mass media and marketing strategies.	4.86	HA	3
Availability of fast food and community life.	4.96	HA	1
Services offered by the flea market.	4.83	HA	4
Food pattern and lifestyle	4.92	HA	2
Socio-economic status and sanitation	4.65	HA	6
Cultural ethnic background	4.81	HA	5
<b>Average Weighted Mean</b>	<b>4.81</b>	<b>HA</b>	

Table 9 presents the weighted mean and the corresponding interpretation of effects of nutritional practices on health along the area of environment and community.

As shown in the table, rank 1 is "Availability of fast food and community life", with a weighted mean of 4.96 or Highly Agree. Sometimes the nutritional practices have an effect on the availability of food in the community. Assessing the food environment balance diet purchase at the store carries food items that are healthy produces and fresh, Kaiser, Carr, & Fontanella [31]. Rank 2 is "Food pattern and lifestyle" with a weighted mean of 4.92 or Highly Agree. Food style and pattern have an impact on health and nutritional practices in the community. It determines the food intention lifestyle, patronage, satisfaction, and attributes, Nair [32]. Rank 3 is "Mass media and marketing strategies", with a weighted mean of 4.86 or Highly Agree. Marketing techniques and the promotion of food have an impact on the nutritional health and practices in the community and environment through social media. Social media is in demand for the promotion of nutritional awareness and appropriate strategies to nutritional practices, Melancon, & Dalakas [33]. The overall weighted mean is 4.81 or Highly Agree. The system of food measures the effect needed in the increased pressures in the environment needed sufficiently in the practices of nutrition in the community, Springmann, et al. [34].

## CONCLUSIONS

Based on the foregoing findings, the following conclusions are drawn:

- a) It shows that the profile of the respondents contributes to the nutritional awareness in the improvement program of nutrition. It shows that they are aware of the proper nutrition, yet while they know these facts, they do not consider such factors in their health practices.
- b) It shows that home, school, and community are three of the most important agencies that develop awareness on health and nutrition. From these agencies come personal concern, home, and family breeding, and community/environment influences. The support of these agencies directs the individuals on the right choices on nutrition.
- c) It shows that different factors play a significant role in the nutrition practices of students. These include their choices, breeding, and environmental status. These factors could dictate the eating/nutritional habits and practices of the individuals.

- d) It shows that the health of the students corresponds to their nutrition awareness and practices. Their physical and mental well-being could be attributed to the way that maintains strong and sound body conditions.

## RECOMMENDATIONS

Based on the following findings and conclusions drawn, the researcher offers the following recommendations.

- a) Profile of the respondents should be aware of nutritional awareness as a contributory factor to nutritional programs on their health benefits and welfare. To include nutritional knowledge and the benefits gained from them particularly on their health and lifestyle in the community.
- b) There must be nutritional practices in terms of personal concern, home and family, and community environment. Healthy living provides a better lifestyle among the respondents. To include gaining knowledge on nutritional awareness through seminars and workshops to better improve healthy living not only within the home and family but to the community and to the society.
- c) Nutrition practices must be the concern of the individual person. They contribute much to the nutritional practices and awareness through information dissemination, proper implementation of the nutritional practices in the home and family as well as to the community and environment to where they belong.

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