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The dietary habits and life satisfaction according to the food groups consumed by young people

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Summary. Aim: To determine the relationship between the food groups consumed by students and the dietary habits and life satisfaction. Methods: The cross-sectional study was carried out with 811 students studying in Balıkesir University, Faculty of Health Sciences in January 2018 in Turkey. In this study, Personal Information Form, Survey of Eating Habits and Satisfaction with lifeScale that included the socio-demographic characteristics and the frequency of food consumption of the students were used. Kolmogorov Simirnov test, mean, standard deviation, number, percentage, Mann Whitney U test, Kruskal Wallis test, Spearman correlation and multiple linear regression analysis were used in the evaluation of the data. Results: Satisfaction with lifescores of students who often consume grains, fruits, meat and its derivatives were found to be high. It was determined that as self-perception against being overweight and eating habits scores increase, lifesatisfaction decreases in students. Prejudice score against being overweight was found to be high in students studying nursing care, whose BMI is normal and who rarely consume vegetable. The positive and negative thought scores caused by being overweight were found to be high in overweight/obese students who often consume dairy product and legume. The self-perception score against being overweight was found to be high in students who are obese and often consume dairy products. Eating habits score was found to be high in weak students who rarely consume dairy products and fruit (P<0.05). Conclusions: It was found that while the consumption of foods with high quality and high calorie value by students increases satisfaction with life, perceiving himself/herself to be overweight reduces satisfaction with life. It was found that BMI affects thoughts on being overweight. It was determined that the students who receive dietary education, who perceive themselves to be overweight and who have excessive positive-negative thoughts about being overweight have high awareness of being overweight and prefer healthy diet practices. Based on these results, an increase in satisfaction with life can be achieved by providing proper dietary habits and receiving dietary education.

Key words: life satisfaction, nutritional elements, dietary habits, BMI

Introduction

In order to sustain life and to preserve health, nutrients such as carbohydrates, proteins and fats and minerals must be consumed in a sufficient and balanced manner. It was scientifically revealed that health is impaired when one of these elements is not taken or is taken more or less than necessary (1). In order to maintain nutritional balance in terms of health pro-

tection, the World Health Organization recommends that 55-60% of the daily energy should be supplied from carbohydrates, 10-15% from proteins and 25-30% from fats. It is of great importance to increase the nutrient group diversity in order to eliminate nutrient deficiencies and to ensure adequate intake of nutrients. According to the recommendation of the World Health Organization, this energy balance can be ensured if 2-3 servings of meat products, dairy products

and vegetables, 2 to 4 servings of fruit, 6-11 servings of grain are consumed everyday (2).

Going to university leads to significant changes in students' expectations and life demands, both due to adaptation to university life and the impact of adolescence. These changes in lifestyle of students cause changes in their dietary habits. During this period, young people gradually adopt their own dietary habits, health attitudes and behaviors. It is observed that university students have negative dietary habits such as skipping a meal, fast-food consumption, insufficient and unbalanced nutrition. Students who perceive themselves to be overweight, who have prejudices against being overweight, who have positive or negative thoughts caused by being overweight, can have negative behaviors such as avoiding some food groups or giving weight to some food groups. There is a linear relationship between the negative habits acquired during this period and the lifelong poor health of the individual. Changing dietary habits may affect satisfaction with life as well as the mental and physical condition of university student. Therefore, it is very important to adopt healthy dietary habits by consuming nutrients in an adequate and balanced way (1,3).

Satisfaction with life is defined as a general assessment of the quality of life of people according to their chosen criteria. In addition to this, satisfaction with life can be defined as the evaluation of human life as a result of comparing his/her expectations to what she/he has; evaluation of the whole life positively in accordance with the criteria determined by the individual; and an important element of a comprehensive happiness, the sum of the beliefs and evaluations of individual about life or an individual's general attitude towards his/her life (4,5). There are six different components of satisfaction with life. These components are an individual's income level, occupation and social status, social opportunities and social mobility, welfare conditions, current state policy and environment, family and social relations (6). Satisfaction with life of individuals can be affected by many factors. Some of these are self-esteem, happiness from daily life, meaning attributed to life, harmony in reaching the goals, satisfaction with the physical appearance, physical well-being of an individual, adequate nutrition, economic security and social relations (7). Research shows

that poor dietary habits are associated with lower levels of satisfaction with life (8-10). Grunert et al. (2007) found a significant relationship between "food-related satisfaction with life" and mental health (11). This research was conducted to determine the relationship between the food groups consumed by university students and the dietary habits and satisfaction with life.

Materials and Methods

Study group

The cross-sectional study was carried out with 811 students studying in Balıkesir University, Faculty of Health Sciences in January 2018 in Turkey. The universe of the study consisted of all students (n = 1124) studying at Balıkesir University Faculty of Health Sciences. Balıkesir University is in Balıkesir province located in the North West coast of Turkey. In the research, the sample size was calculated as 283 with 95% confidence interval and 0,05 deviances by Epi Info Statcalc program. In order to increase the quality of the research, it was aimed to reach the whole of the universe without choosing the sample. The study was based on voluntariness and the students who did not accept to participate in the study and those who did not complete the questionnaire forms (313 students, %27.8) are excluded from the scope of the study and the research was completed with a total of $811 \ (\%72.1)$ students.

Ethics Committee Approval

In order to carry out the research, necessary permission was obtained from Balıkesir University Faculty of Medicine, Clinical Research Ethics Committee (Issue: 2017/102) and Balıkesir University Balıkesir Faculty of Health Sciences (Issue: 23601865-044). The purpose of the study was explained to the students who agreed to participate in the research, and the written Voluntary Information Consent was obtained by stating that their identities would be kept confidential and they could leave the study at any time they wanted.

Data Collection

In the data collection, personal information form including socio-demographic characteristics, Survey

of Eating Habits and Satisfaction with Life Scale were used. The students completed the questionnaire themselves. Survey duration is 20 minutes. The students expressed their height and weight measurements themselves. The students' BMI was calculated by the researchers with the formula of "body weight (kg)/length (m)²". According to the World Health Organization's guidelines, the BMI is classified into four categories: those below 18.5 kg/m² are slim, the ones between 18.5-24.9 kg/m² are normal and those with 25 kg/m² and over are overweight or obese (12).

Assessment Tools

Personal Information Form: The personal information form developed by the researchers consists of a total of 16 questions including demographic characteristics and frequency of nutrients consumption. The frequency of consumption of nutrients was categorized by the researchers according to the students' responses (Table 2).

Survey of Eating Habits: It was developed by Byrne and Kolley (1981). There is Kadıoğlu's study with university students in Turkey (13). The scale consists of 4 dimensions, including prejudices against being overweight, positive and negative thoughts brought by being overweight, self-perception of being overweight and eating behaviors. The scale is five-point Likert type and consists of 65 items. Each item is scored as fully opposed (1), mostly opposed (2), undecided (3), mostly agree (4), fully agree (5). The lowest total score is 65 points and the highest total score is 325. The Cronbach Alpha internal consistency coefficient of the whole scale was determined as .79.

Satisfaction with Life Scale (SLS): The validity and reliability study of the scale developed by Diener, Emmons, Larsen and Griffin (1985), was carried out by Dağlı and Baysal (2016) (5). The scale is five-point Likert type and consists of 5 items. Each item is scored between I totally disagree (1 point) and fully agree (5 points) (4). The Cronbach Alpha internal consistency coefficient of the whole scale was determined as .83.

Data Analysis

Mean, standard deviation, minimum, maximum values, numbers and percentages were used in the evaluation of the data. Kolmogorov Simirnov test was used

to determine whether the data show normal distribution. The Mann Whitney U Test and Kruskal Wallis Test (Data were skewed) were used to determine the relationship between the students' departments, dietary education status, body mass index and frequency of nutrients consumption, dietary habits and satisfaction with life. The relationship between the Satisfaction with Life Scale and the Survey of Eating Habits sub-dimensions was determined by Spearman's correlation test. The variables affecting satisfaction with life were determined by multiple linear regression analysis. Type I error level was accepted as P <0.05 for this research.

Findings

The mean age of the students included in the study was 20.22 ± 1.78 (min 17, max 34); 43.2% of them are midwifery students (n = 350), 56.8% of them are nursing students (n = 461).

Table 1 shows the relationship between dietary habits and satisfaction with life according to the students' departments, dietary education status and body mass index (BMI). It was determined that being overweight prejudices of the students in the nursing department are higher than the students in the midwifery department (P = 0.000). It was found that the selfperception of being overweight of the students who take dietary education are higher than those who do not take education (P = 0.011). The total score of the dietary habits and the prejudices against being overweight, the positive and negative thoughts of being overweight and self-perception of being overweight subscale scores were found to be statistically and significantly higher among the students with normal BMI than those who are weaker (P<0.05). The dietary habits subscale scores of the students with weaker BMI were found to be statistically and significantly higher than those of normal BMI (P = 0.021). The total score of the dietary habits of the students with overweight/ obese BMI, positive and negative thoughts of brought by being overweight and self-perception of being overweight were found to be statistically and significantly higher than the students whose subscale points are weaker (P < 0.05).

Table 2 shows the relationship between dietary habits and satisfaction with life according to the frequency of food groups consumption. Satisfaction with life scores of those consuming meat 1 or 2 times in a week were found to be statistically and significantly higher than those consuming meat 1 or 2 times in a month (P = 0.008).

The positive and negative thoughts (P = 0.004) and the self-perceptions of being overweight (P = 0.002) of those who consume milk and dairy products everyday were found to be statistically and significantly higher than those who consume milk or dairy products 1 or 2 times in a week. The eating behaviors scores of those who consume milk and dairy products 1 or 2 times in a week were found to be statistically and significantly higher than those who consume everyday (P = 0.007).

The self-perception scores of those who consume milk and dairy products everyday were found to be statistically and significantly higher than those who consume 1 or 2 times in a month (P = 0.002) (Table 2).

The nutritional behaviors scores of those who consume fruit 1 or 2 times in a week were found to be statistically and significantly higher than those who consume everyday (P =0.022). Satisfaction with life scores of those who consume fruit every day were found to be statistically and significantly higher than those who consume 1 or 2 times in a week and 1 or 2 times in a month and those who consume fruit 1 or 2 times in week were found to be statistically and significantly higher than those who consume 1 or 2 times in a month (P =0.002). Prejudice against being overweight scores of those who consume vegetable 1 or 2 times in a week

Table 1. The relationship between dietary habits and satisfaction with life of students according to students' departments, dietary education status and BMI

	n(%)	Dietary habits total	Prejudices against being overweight	The positive and negative thoughts of being overweight	Self-perception against being overweight	Eating behaviors	Life satisfaction
		Mean±SD	Mean±SD	Mean±SD	Mean±SD	Mean±SD	Mean±SD
Department*							
Midwifery	350(43.2)	192.93±18.04	26.61±6.38	55.63±6.5	21.13±5.75	27.76±4.74	15.35±3.64
Nursing	461(56.8)	194.02±2.5	28.58±7.57	54.68±7.42	20.93±5.51	27.45±4.36	15.22±4.08
		P=0.369	P=0.000	P=0.155	P=0.669	P=0.337	P=0.781
Mother Education *							
Primary education	648 (79.9)	193.88±19.34	27.87±7.12	55.28±6.93	21.06±5.61	27.52±4.57	15.27±3.98
High School and Above	163 (20.1)	192.27±20.01	27.19±7.22	54.32±7.47	20.82±5.66	27.81±4.37	15.28±3.56
		P=0.343	P=0.638	P=0.116	P=0.638	P=0.481	P=0.702
Father Education *			,				
Primary education	493 (60.8)	193.61±19.72	28.18±7.26	54.84±6.91	20.97±5.56	27.57±4.58	15.21±3.85
High School and Above	318 (39.2)	193.47±19.13	27.04±6.91	55.47±7.27	21.08±5.71	27.59±4.45	15.37±3.97
		P=0.707	P=0.765	P=0.316	P=0.707	P=0.836	P=0.543
Dietary Education *							
Yes	607(74.8)	194.33±20.24	27.83±7.30	55.24±7.14	21.31±5.64	27.55±4.49	15.4±4.12
No	204(25.2)	191.23±16.83	27.42±6.66	54.64±6.77	20.12±5.43	27.68±4.67	15.24±3.82
		P=0.061	P=0.580	P=0.240	P=0.011	P=0.815	P=0.641
BMI**							
18.5 and below (slim)	107(15.3)	182.24±16.91	26.08±6.51	52.85±6.31	15.56±3.94	28.74±4.19	15.35±3.5
18.6-24.9 (normal)	578(82.6)	195.27±19.26	28.11±7.36	55.48±6.93	21.26±5.26	27.7±4.52	15.49±3.91
25 and above (overweight / obese)	15(2.1)	193.73±20.33	23.93±5.17	57.8±8.16	24.86±5.5	26.13±4.65	14.2±4.93
		P=0.000	P=0.004	P=0.001	P=0.000	P=0.021	P=0.602

	n(%)	Dietary habits total	Prejudices against being overweight	The positive and negative thoughts of being overweight	Self-perception against being overweight		Life satisfaction
		Mean±SD	Mean±SD	Mean±SD	Mean±SD	Mean±SD	Mean±SD
Meat etc.							
Everyday	84(10.4)	196.06±21.79	29.13±7.63	56.01±7.88	21.72±5.94	27.64±5.07	14.98±4.02
1 or 2 per week	597(73.6)	192.92±18.56	27.42±6.91	54.91±6.75	20.88±5.55	27.59±4.51	15.55±3.79
1 or 2 per month	130(16)	194.85±21.84	28.23±7.74	55.33±7.8	21.18±5.69	27.5±4.28	14.22±4.09
		P=0.148	P=0.126	P=0.223	P=0.524	P=0.725	P=0.008
Milk and Dairy p	roducts						
Everyday	350(43.2)	194.52±19.22	27.22±6.82	55.92±7.15	21.76±5.98	26.96±4.83	15.41±3.96
1 or 2 per week	396(48.8)	192.56±18.69	27.82±7.12	54.51±6.66	20.51±5.21	28.06±4.08	15.32±3.61
1 or 2 per month	65(8)	194.43±24.84	29.92±8.48	54.15±8.33	20.09±5.5	27.98±5.1	14.27±5
		P=0.214	P=0.053	P=0.004	P=0.002	P=0.007	P=0.272
Fruit							,
Everyday	291(35.9)	192.32±20.12	27.44±7.24	55±6.85	21.05±5.6	27.01±4.73	15.78±3.79
1 or 2 per week	459(56.6)	194.13±18.83	27.86±6.9	55.13±7.22	20.94±5.58	27.88±4.36	15.18±3.85
1 or 2 per month	61(7.5)	195.13±21.02	28.14±8.38	55.19±6.78	21.36±5.95	28.03±4.6	13.62±4.25
		P=0.645	P=0.673	P=0.997	P=0.791	P=0.022	P=0.002
Vegetable							
Everyday	323(39.8)	193.28±20.21	27.64±7.27	55.37±7.07	20.69±5.86	27.39±4.67	15.61±3.85
1 or 2 per week	423(52.2)	193.12±18.33	27.42±6.91	54.86±6.82	21.15±5.33	27.71±4.47	15.17±3.84
1 or 2 per month	65(8)	197.64±22.55	30.23±7.55	55.15±8.32	21.75±6.14	27.64±4.23	14.29±4.31
		P=0.611	P=0.013	P=0.700	P=0.331	P=0.525	P=0.068
Grain							
Everyday	263(32.4)	193.25±19.31	27.61±7.32	55.44±7.02	20.65±5.49	27.73±4.76	15.44±3.99
1 or 2 per week	483(59.6)	193.87±19.12	27.9±7.08	55.02±6.83	21.17±5.65	27.47±4.36	15.36±3.76
1 or 2 per month	65(8)	192.43±22.85	26.9±6.85	54.2±8.61	21.32±5.82	27.8±4.86	14±4.32
		P=0.973	P=0.449	P=0.579	P=0.451	P=0.750	P=0.027
Legume							
Everyday	102(12.6)	193.21±21.83	29.29±8.05	54.36±7.26	20.5±5.58	27.43±5.15	15.35±3.76
1 or 2 per week	584(72)	192.79±18.32	27.43±6.89	54.94±6.85	20.87±5.48	27.53±4.41	15.42±3.8
1 or 2 per month	125(15.4)	197.36±22.22	27.87±7.4	56.34±7.65	22.11±6.12	27.95±4.59	14.53±4.38
-		P=0.05	P=0.235	P=0.041	P=0.052	P=0.443	P=0.186
Egg							
Everyday	212(26.1)	194.08±19.17 (404.28)	28.4±7.18 (427.3)	55.33±6.68	20.97±5.77	26.96±4.78	15.1±3.94
1 or 2 per week	464(57.2)	193.59±19.27 (407.19)	27.64±7.09 (404.77)	55.15±7.16	21.07±5.49	27.7±4.4	15.51±3.78
		192.58±20.72 (383.65)	26.98±7.22 (373.77)	55.49±7.23	20.01±5.8		14.74±4.15
		P=0.582	P=0.114	P=0.739	P=0.922	P=0.055	P=0.105

and 1 or 2 times in a month were found to be statistically and significantly higher than those who consume vegetable everyday (P = 0.013) (Table 2).

Satisfaction with life scores of those who consume grains every day were found to be statistically and significantly higher than those who consume 1 or 2 times in a week and 1 or 2 times in a month (P = 0.027) (Table 2).

Positive and negative thoughts of obese scores of those who consume legume every day and 1 or 2 times in a week were found to be statistically and significantly higher than those who consume 1 or 2 times in a month (P = 0.041) (Table 2).

As a result of the analysis, it was found that the higher scores in self-perception against being overweight and eating behavior means the lower satisfaction with life (Table 3). In this study, multiple linear regression analysis was performed to examine the relationship between food groups and dietary habits subdimensions and satisfaction with life (Table 4). As a result of the analysis, it was found that there is a significant relationship between fruit consumption and life satisfaction, explaining 22% (R^2 =0.22) of the variance.

Discussion

There is a relationship between dietary habits of individuals and lifelong health level. Nutritional behavior can affect mental and physical condition as well as satisfaction with life (1). In this study, it WAS determined that there is a relationship between the frequency of nutrients consumption and dietary habits and life satisfaction. In addition to this, this study determined that there is a relationship between eating habits and life satisfaction.

In the study, the total score of the eating habits of the students with normal and obese BMI was found to be significantly higher than the weak students. In Kadıoğlu's study (2017), total scores of dietary habits were found to be significantly different in weak, normal and obese individuals (P<0.05) (13). It is expected that the students with being overweight will have high negative perception towards being overweight and higher self-perception scores of being overweight so high total score of nutritional habit is also expected.

It was determined that the prejudices against being overweight of the students in the nursing depart-

	Spearman's r	p
Prejudices against being overweight	062	0.078
The positive and negative thoughts of being overweight	.003	0.932
Self-perceptions against being overweight	077	0.029*
eating behaviors	076	0.032*

			В	t	p	%95 CI	
Model 1							
Meat			-0.406	-1.517	0.130	-0.932	0.119
Fruit			-0.776	-3.330	0.001*	-1.233	-0.319
Grain			-0.291	-1.236	0.217	-0.752	0.171
R= 0.150	$R^2 = 0.22$	Durbin-Watson=1	1.955 (p< 0.0001)				
Model 2			-0.043	-1.768	0.078	-0.091	0.005
Self-perceptions against being overweight		-0.045	-1.482	0.139	-0.104	0.015	
Eating behaviors		-0.043	-1.768	0.078	-0.091	0.005	
R= 0.080	R ² = 0.006	Durbin-Watson=1	1.973 (p< 0.077)				

ment are higher than the students in the midwifery department (P < 0.001). In the study of Sert et al. (2016), prejudice against being overweight of midwifery students was found to be significantly higher than nursing students (14). Midwifery and nursing education course curricula in our country are not standardized but generally different. It is thought that this difference is caused by the curriculum content of the study group.

It was found that the self-perceptions of the students who take dietary education are higher than those who do not take education (P <0.05). It can be said that the body awareness level of the students who take dietary education is high. Anjali et al. (2017) reported that dietary education increases the knowledge level of students about BMI (15). Considering that dietary education and the level of knowledge about BMI are increasing, it is expected that students who are in dietary education and who have high BMI will perceive themselves as obese.

As a result of the research, it was found that positive and negative thoughts about being overweight and self-perception scores of being overweight increases. People who are overweight can be said to have high awareness about their bodies. In the study of Kadıoğlu (2017), it was stated that as the BMI increases, the self-perception score is higher against being overweight (P <0.001). In addition to this, in Kadıoğlu's study, prejudices against being overweight, positive and negative thoughts about being overweight, and self-perception scores of being overweight were found to be statistically and significantly higher in those who have had a slimming diet (13). In the study, it was found that prejudice against being overweight scores of people with normal BMI are significantly higher than those who are weak. Similarly, it was found that BMI affects prejudice against being overweight in many other researches (16,17). In addition to this, the positive and negative thoughts of being overweight of those who consume legume more frequently are found to be higher in those who consume legume less frequently. Legumes are nutrients with high calorific value (18). For this reason, there may be relation between more frequent legume consumption and high BMI. According to these results, it can be seen that BMI has an effect on prejudice against being overweight, positive and negative thoughts of being overweight

and self-perception of being overweight. It was found that the positive and negative thoughts of being overweight and the self-perceptions of being overweight of those who consume milk and dairy products more frequently are high. Lee et al. (2014) and Kratz et al. (2012) stated that there is a relationship between high dairy consumption and low being overweight prevalence (19,20). In this context, it can be said that people who perceive themselves as obese and have negative thoughts against being overweight pay attention to their diets and consume milk and dairy products more frequently because they are afraid of being overweight.

In the study, it was found that there is a decrease in the students' eating behaviors subscale scores as BMI increases. Similarly, in Kadıoğlu (2017) and Cooke and Papadaki's (2014) researches, it was determined that there is a statistically significant relation between eating habits and BMI (13,21). Orellana et al. (2016) also found a relationship between high BMI and diet and weight fluctuation anxiety (22). It is thought that overweight individuals may be more likely to limit their eating behavior or to take more control over their behaviors due to fear of getting fatter when compared to weak individuals. In the study, it was found that the eating behavior scores of those who rarely consume fruit are higher than those who consume fruit more frequently. A small percentage of students (32.4%) consume fruit every day. It is generally thought that snacking behavior is related to consumption of salty and fatty foods rather than fruits.

Satisfaction with life scores of students who consume meat, grains and fruits frequently were found to be high. These foods are healthy food groups and contain high amounts of energy (18). Therefore, people who consume these nutrients more often are considered to have higher satisfaction with life due to high energy. According to Schnettler et al. (2017) research, those who do not do diet were found to have significantly higher Satisfaction with life and Food-Based Satisfaction with life scores than those who have a chronic diet (1). Andre et al. (2017) and Mitle et al. (2015) stated that the satisfaction with life of those who are in healthy nutrition group consuming healthy fruit, vegetables and grains frequently are significantly higher (23,24). Appleton and Song (2008) stated that the income level is among the components of life

satisfaction. Due to the economic inadequacy of developing countries, meat and meat products cannot be consumed very often. Therefore, satisfaction with life is affected negatively. Considering that the level of income and consumption of meat and meat products increase, it can be said that there is a relationship between satisfaction with life and nutrition (6). There is a negative relationship between negative mood and satisfaction with life according to some researches. In these studies, it was found that there is a relationship between iron, vitamin B12, folate and zinc deficiency and negative mood. Meat and meat products are rich in protein, iron, vitamin B12, zinc and folic acid (25-28). Petursdottir (2015) reported that people who do not eat meat and meat products have a significantly higher negative mood than those eating meat (29). Multiple regression analysis revealed a significant relationship between fruit consumption and life satisfaction. Many fruits are rich in carotene and vitamin C. Laugero et al. (2011), Oishi et al. (2009) and Kaner et al.(2015) showed a negative relationship between negative mood and carotene and vitamin C intake (10, 30, 31). Grains group foods are rich in thiamine. Kaner et al. (2015) reported that individuals with negative mood have deficiency in iron, folic acid, riboflavin, thiamine and vitamin B6 intake and serum B12 level (31). In this context, insufficient meat and meat products, carotene and vitamin C, iron, folic acid, riboflavin, thiamine, vitamin B6 consumption increase the tendency to negative mood, resulting decrease in life satisfaction.

In the study, it was found that satisfaction with life decreases as the self-perception towards being overweight increases. Satisfaction with life is the general judgment and evaluation of the individual about his/ her life. In all the nations of the world, beauty is considered to be slim, people who pay attention to their bodies and weight are reported to love their bodies and themselves, and thus satisfaction with lifeis thought to be high (32). Zuffianò et al. (2018) found that students with positive satisfaction with lifeare satisfied with their physical appearance (7). In this context, it can be said that satisfaction with lifeof individuals who perceive themselves as obese is low. In this study, it was found that satisfaction with lifedecreases with increasing eating behavior scores. Laugero et al. (2011) stated that less fruit, vegetables and protein intake and more salty snacks and sweet intake has a relation with negative mood (10). In their study, Andre et al. (2017) reported a significantly higher level of satisfaction with lifeamong people with a healthy diet (24). As the eating behavior increases, the being overweight status may increase, and the satisfaction with lifescores of the people with high eating behavior scores are expected to be low. However, there is no correlation between BMI and satisfaction with lifein this study. Orellana et al. (2016) stated that there is no relation between high BMI and satisfaction with life (21). This situation can be explained by the fact that physical perception rather than BMI has affected on life satisfaction.

Limitations

This study include university students and thus the results can not be generalized to diverse groups.

Conclusion

In the study, it was found that satisfaction with lifedecreases as self-perception against being overweight and eating behavior scores increase, and satisfaction with lifescores of students who consume meat, grains and fruits frequently are found to be high. Based on these results, it can be said that these nutrients have positive effects on satisfaction with lifedue to their high quality and higher caloric values. It was found that BMI affects self-perception of being overweight, positive and negative thinking towards being overweight and prejudice of being overweight. However, in the study it was determined that the satisfaction with life of people who perceive themselves as fat decreases, whereas physical perception rather than BMI has an effect on life satisfaction.

In the study, it was determined that students who perceive themselves as obese and who have high negative thoughts about being overweight, have high awareness of being overweight and consume dairy products and grains more frequently for healthy diet practices.

In the study, it was determined that there is a relationship between dietary education and self-per-

ception of being overweight. Based on these results, an increase in satisfaction with life can be achieved by providing proper dietary habits with dietary education. It can be said that proper eating habits will lead to life-long satisfaction with life because eating habits affect lifelong health level. In addition to this, it can be ensured that unprejudiced and quality care to obese people by determining prejudices against being overweight in midwives and nurses during their student years and adding being overweight and prejudice problems in the course curricula.

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