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THE ROLE OF NUTRITION EDUCATION IN PREVENTING DISORDERED EATING IN ADOLESCENTS IN ONDO STATE, NIGERIA

OGBORU, Justina Oghenerioborue, *PhD* Department of Home Economics, Adeyemi Federal University of Education, Ondo City, Ondo State, Nigeria Email: tinaogboru1@gmail.com) Telephone: +234 806 025 3291

ABSTRACT

Adolescence is a critical period of growth and development where individuals are particularly vulnerable to disordered eating behaviours such as binge eating, purging, and restrictive eating. The role of nutrition education in preventing disordered eating in this population has become increasingly important in Nigeria, particularly in Ondo State. This justifies the need for conducting this study. The study was guided by three research objectives and three research questions. The study was carried out in public Secondary Schools in Ondo State, Nigeria. The population for this study was 809 Home Economics teachers in public secondary school in Ondo State. The information about the population was obtained from Ondo State Ministry of Education. While the sample size was 246 and it was obtained using Yaro Yamane formula. The sample size was randomly selected and sampled using simple random sampling technique. A structured questionnaire was used for data collection. The questionnaire was developed by the researcher and face validated by three experts in the Department of Home Economics, Adeyemi Federal University of Education, Ondo City, Ondo State, Nigeria. The reliability of the instrument was tested with Cronbach alpha and a reliability coefficient of 0.80 was obtained indicating that the instrument was reliable and effective for data collection. The data collected were analyzed using descriptive statistics. The findings showed ten (10) causes of disordered eating behaviours among adolescents in Ondo State; thirteen (13) impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State; and twelve (12) roles of nutrition education in preventing disordered eating in adolescents in Ondo State. From the result, it was concluded that nutrition education plays a crucial role in preventing disordered eating by promoting positive eating behaviours in adolescents. The study recommended that Ondo State government should develop and implement nutrition education programmes in schools and community settings to educate adolescents on healthy eating habits and the risks of disordered eating; also, involve parents, teachers, and healthcare providers in the delivery of nutrition education programmes to ensure a holistic approach to preventing disordered eating.

Keywords: Nutrition, Nutrition Education, Disordered Eating, Adolescents *Keywords:* Discourses, Epistemology, Teacher Education.

1. INTRODUCTION

The role of nutrition education in preventing disordered eating in adolescents is a critical issue, particularly in Nigeria where nutrition-related issues are prevalent. Disordered eating, which encompasses a range of abnormal eating behaviours, can have severe physical and mental health consequences for adolescents (Adepoju, & Oyewole, 2018). Ondo State, in particular, experiences high rates of malnutrition among adolescents, underscoring the need for targeted interventions (Ogunba & Oyewole, 2020). Poor dietary knowledge and feeding practices often contribute to malnutrition, making nutrition education essential for promoting healthy eating habits. Nutrition

education can empower adolescents with the knowledge and skills necessary to make informed food choices, reducing the risk of disordered eating Ogunba & Oyewole, 2020).

Adolescents are individuals between the ages of 10 and 19 World Health Organization (WHO, 2018). They are individuals between the ages of 10 and 19 who are undergoing physical, cognitive, and emotional development as they transition from childhood to adulthood (Durosaro, 2018). From a psychological perspective, adolescents are defined as individuals undergoing significant cognitive, emotional, and social changes as they transition from childhood to adulthood (Ogunba & Oyewole, 2020). According to Owojuyigbe et al., 2019, adolescent is a period of transition marked by rapid physical growth, hormonal changes, and cognitive development, leading to increased autonomy and independence from parents. As noted by Adebiyi (2020), adolescent refers to a phase of life characterized by identity formation, peer relationships, exploration of values and beliefs, and increased risk-taking behaviours. Adolescents under significant changes in cognitive, emotional, and social development, including the formation of identity, development of decision-making skills, and exploration of career and educational options (Oyewole & Ogunba, 2019). Adolescents in Nigeria face numerous nutrition-related challenges, including poor dietary knowledge, inadequate feeding practices, widespread malnutrition and disordered eating (Adepoju & Oyewole, 2018).

Disordered eating encompasses abnormal eating behaviours, which poses severe physical and mental health risks to adolescents worldwide (American Psychiatric Association, 2013). Eating disorders are defined as a group of conditions characterized by abnormal eating habits, nutritional deficiencies, and related physical and mental health problems (Ezeh et al., 2020). According to Musa et al. (2019), eating disorder refers to a range of psychological disorders characterized by abnormal or disturbed eating habits. From a cultural perspective, eating disorders referred to a culturally-bound syndrome characterized by abnormal eating behaviours, body image concerns, and emotional distress, influenced by cultural norms, values, and beliefs (Adepoju & Oyewole, 2018). This includes the cultural and societal factors that contribute to eating disorders. Some of the eating disorders that exist, including anorexia nervosa, bulimia nervosa, and binge eating disorder, among others (Musa et al., 2019). Theses disordered eating which are common among adolescents can be overcome through quality nutrition education.

Nutrition education is the process of providing information and teaching individuals and communities how to make healthy food choices and develop eating habits that promote overall well-being (Babatunde et al., 2019). According to Ogbonna & Okonkwo (2018), nutrition education is the process of promoting awareness and providing information on nutrition and dietary practices, with the aim of influencing behaviours that contribute to better health outcomes. WHO (2018) referred nutrition education as any combination of educational strategies, accompanied by environmental supports, designed to facilitate voluntary adoption of food choices and other food-and nutrition-related behaviours conducive to health and well-being. According to Kumanyika (2020), nutrition education is the process of acquiring knowledge, skills, and attitudes that enable individuals to make informed decisions about their diet and lifestyle.

Nutrition education plays a crucial role in promoting healthy eating behaviours among adolescents by providing them with the knowledge and skills necessary to make informed food choices. It can help adolescents develop a positive relationship with food and their bodies, leading to a reduced risk of disordered eating behaviours (Oluwagbemigun, 2019). Nutrition education can also help adolescents develop a positive body image by teaching them about the importance of nourishing their bodies with nutritious foods (Ijarotimi, 2018). This can help prevent disordered eating behaviours that are often linked to negative body image issues. In addition, nutrition education can help adolescents' separate fact from fiction when it comes to food and dieting myths (Dimkpa, 2018). By providing accurate and evidence-based information, nutrition education can help prevent disordered eating behaviours that may result from misconceptions about food and dieting (Dimkpa, 2018). Nutrition education can help adolescents understand proper food handling techniques, storage methods, and hygiene practices to prevent food contamination and foodborne diseases (Imeh-Obu et al., 2019).

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Despite the crucial impacts of nutrition education, there is a dearth of research findings on the roles of nutrition education in preventing disordered eating among adolescents in Ondo State, Nigeria. Ogunba and Oyewole (2020) noted the prevalence of disordered eating among adolescents in Ondo State is alarming, with studies indicating that poor dietary knowledge, inadequate feeding practices, and widespread malnutrition contribute to the issue. The absence of functional and effective nutrition education contributes to disordered eating among adolescents in Ondo State, Nigeria. Thus, the need for effective nutrition education programmes to prevent disordered eating is very imperative. Therefore, the study examined the role of nutrition education in preventing disordered eating in adolescents in Ondo State, Nigeria.

2. PURPOSE OF THE STUDY

The main purpose of the study was to investigate the role of nutrition education in preventing disordered eating in adolescents in Ondo State, Nigeria. Specifically, the study determined the:

- a) causes of disordered eating behaviours among adolescents in Ondo State;
- b) impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State; and
- c) roles of nutrition education in preventing disordered eating among adolescents in Ondo State.

2.1 Research Questions

The study was guided by the following research questions:

- 1. What are the causes of disordered eating behaviours among adolescents in Ondo State?
- 2. What are the impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State?
- 3. What are the roles of nutrition education in preventing disordered eating among adolescents in Ondo State?

2.2 Research Methodology

The study adopted a descriptive survey research design. A descriptive survey research design was considered appropriate for this study because it involved the use of structured questionnaire to sought the views of Home Economics teachers in secondary schools on the role of nutrition education in preventing disordered eating in adolescents in Ondo State, Nigeria. The study was carried out in public Secondary Schools in Ondo State, Nigeria. Ondo State is one of the states in the South-West region of Nigeria. The population for this study was 809 Home Economics teachers in public secondary school in Ondo State. The information about the population was obtained from Ondo State Ministry of Education. While the sample size was 246 and it was obtained using Yaro Yamane formula. The sample size was randomly selected and sampled using simple random sampling technique.

The instrument for data collection was structured questionnaire designed by the researchers. The questionnaire was divided into two parts. Part 1 was structured to collect data on personal information about the respondents while Part 2 was divided into three different sections (A, B and C). Section A collect data on the causes of disordered eating behaviours among adolescents in Ondo State; Section B collected data on the impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State; and Section C collected data on the roles of nutrition education in preventing disordered eating among adolescents in Ondo State. The questionnaire items had a four-point response option of Strongly Agree (S.A), Agree (A), Disagree (D) and Strongly Disagree (SD) with corresponding values of 4, 3, 2, and 1 respectively. The instrument was face validated by three lecturers in Department of Home Economics Education, Adeyemi Federal University of Education, Ondo City, Ondo State, Nigeria. The validated instrument was trial tested on 30 Home Economics teachers in Edo State, Nigeria in order to determine the reliability and suitability of the instrument for the study. Cronbach Alpha coefficient was used and the result revealed 0.80 reliability coefficient value, indicating that the instrument is reliable and suitable to collect the desired data.

Data collection was carried out by the researcher and three research assistants. The researcher and the research assistants participated fully in administering and retrieving of the

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questionnaires from the respondents. A total of 246 questionnaires were produced and administered to Home Economics teachers in Ondo State. After the questionnaire were collected, it was noticed that some were not properly rated or ticked and they were not used for the final analysis whereas few others were not retrieved from the respondents. Only the responses of 223 respondents comprising, this indicated that 23 of the questionnaires were not used for data analysis.

Data collected from the study were analyzed using mean and standard deviation. Mean was used to answer the two (2) research questions. The decision rule was that any mean response whose value is 2.50 and above was "agreed" while any one whose mean value is below 2.50 was "disagreed" by the respondents. Standard deviation was used to find out how close or far the responses of the respondents were to the mean. All the analyses were carried out using Statistical Package for Social Sciences (SPSS) software version 25.

3. PRESENTATION OF RESULTS

The result presented in Table 1 showed the mean responses and standard deviation of the respondents on the causes of disordered eating behaviours among adolescents in Ondo State. The finding indicated that ten (10) items among the 13-items obtained mean responses above 2.50 cut of point, this indicates that the respondents Home Economics teachers) agreed that the items are the causes of disordered eating behaviours among adolescents in Ondo State. Furthermore, the corresponding standard deviation for all the items ranged from 0.67 to 0.87, indicating that the respondents were very close to one another in their responses on the causes of disordered eating behaviours among adolescents in Ondo State.

<u>Research Question 1:</u> What are the causes of disordered eating behaviours among adolescents in Ondo State?

Among Adolescents in Ondo State							
S/N	Items on the Causes of Disordered Eating	x	SD	Remarks			
	Behaviours:						
1	Low self-esteem	2.69	0.87	Agreed			
2	Peer pressure influence	3.05	0.76	Agreed			
3	Social media influence	3.14	0.83	Agreed			
4	Mental health conditions	2.83	0.71	Agreed			
5	Dieting and restrictive eating	3.02	0.78	Agreed			
6	Lack of nutrition knowledge	3.24	0.80	Agreed			
7	Poor eating habits and meal patterns	3.17	0.81	Agreed			
8	Family history of eating disorders	2.20	0.79	Disagreed			
9	Negative emotions and coping mechanisms	2.15	0.87	Disagreed			
10	Bullying and teasing	2.79	0.86	Agreed			
11	Poor sleep patterns	2.21	0.82	Disagreed			
12	Substance abuse	3.21	0.77	Agreed			
13	Major life changes	2.55	0.67	Agreed			

Table 1: Mean Responses and Standard Deviation on the Causes of Disordered Eating Behaviours Among Adolescents in Ondo State

Key: \overline{X} = Mean; SD = Standard Deviation; N = 233 Home Economics teachers

<u>Research Question 2:</u> What are the impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State?

The result presented in Table 2 revealed the mean responses and standard deviation analysis on the impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State. The result revealed that all the items except item 7 had mean values ranging from 2.54 to 3.44 which is above the cut-off point of 2.50. This implied that the respondents agreed that the 13 items are the impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State. The corresponding standard deviation to each of the items ranged from 0.61 to 1.00, showing that the opinions of the respondents were very close to each other in their responses on the impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State.

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Table 2: Mean Responses and Standard Deviation of the Impacts of Disordered Eating Behaviours on the Wellbeing of Adolescents in Ondo State

S/No	Items on Impacts of Disordered Eating Behaviours	X	SD	Remarks
1	Decreased self-esteem and self-worth	3.44	0.76	Agreed
2	Malnutrition and nutrient deficiencies	2.88	0.87	Agreed
3	Negative impact on mental health	3.17	0.78	Agreed
4	Decreased academic performance	2.54	0.71	Agreed
5	Negative impact on physical health	3.05	0.70	Agreed
6	Decreased quality of life	3.06	0.87	Agreed
7	Social withdrawal and isolation	2.41	0.70	Disagreed
8	Increased risk of chronic diseases	3.10	0.79	Agreed
9	Increased risk of depression and anxiety	2.88	1.00	Agreed
10	Negative impact on sleep patterns	2.76	0.67	Agreed
11	Increased risk of substance abuse	2.99	0.69	Agreed
12	Decreased motivation and interest in activities	3.15	0.70	Agreed
13	Negative impact on overall wellbeing	3.06	0.61	Agreed
14	Decreased self-confidence	2.88	0.88	Agreed

Key: \overline{X} = Mean; SD = Standard Deviation; N = 233 Home Economics teachers.

<u>Research Question 3:</u> What are the roles of nutrition education in preventing disordered eating among adolescents in Ondo State?

Table 3 showed the mean responses and standard deviation analysis of the roles of nutrition education in preventing disordered eating among adolescents in Ondo State. From the result, it was revealed that all the 12 items obtained mean values above the 2.50 cut of point. This implies that the respondents agreed that all the items are the roles of nutrition education in preventing disordered eating among adolescents in Ondo State. The corresponding standard deviation to each of the items ranged from 0.66 to 1.00, which indicated that the opinions of the respondents were very close to each other in the responses on the roles of nutrition education in preventing disordered eating among adolescents in Ondo State.

Table 3: Mean Responses and Standard Deviation of the Roles of Nutrition Education in Preventing Disordered Eating Among Adolescents in Ondo State

Preventing Disordered Eating Among Adolescents in Ondo State						
S/No	Items on Sustainable Agricultural Practices	X	SD	Remarks		
1	Promoting healthy eating habits in adolescents	3.40	0.83	Agreed		
2	Supporting healthy weight management	2.88	0.68	Agreed		
3	Educating on nutrition and mental health	3.02	0.78	Agreed		
4	Providing guidance on healthy snacking habits	3.01	0.71	Agreed		
5	Teaching nutrition labeling skills	2.55	0.77	Agreed		
6	Promoting cultural and social norms that support	3.01	0.66	Agreed		
	healthy eating					
7	Educating on the dangers of dieting and restrictive	3.04	0.69	Agreed		
	eating					
8	Promoting flexible eating habits	2.67	0.79	Agreed		
9	Encouraging students to try new foods	3.08	1.00	Agreed		
10	Teaching meal planning skills	2.87	0.77	Agreed		
11.	Providing resources for disordered eating treatment	2.58	0.76	Agreed		
12.	Encouraging open communication about food and	2.69	0.91	Agreed		
	body concerns					

Key: \overline{X} = Mean; SD = Standard Deviation; N = 233 Home Economics teachers

4. DISCUSSION OF RESULTS

Table 1 revealed ten (10) causes of disordered eating behaviours among adolescents in Ondo State; they the causes are low self-esteem, peer pressure influence, social media influence, mental health conditions, dieting and restrictive eating, lack of nutrition knowledge, poor eating habits and meal patterns, bullying and teasing, substance abuse, and major life changes. The finding on lack of nutrition knowledge and skills shows solidarity with Ogunba and Oyewole, (2020) who contended that a significant contributor to disordered eating behaviours among adolescents in Ondo State is due to lack of adequate nutrition education programme (Ogunba & Oyewole, 2020). Also, the finding in peer pressure influence and social media influences are in line with Odejimi et al. (2018) and Adewuya et al. (2019). Odejimi et al. (2018) maintained that negative peer influences, such as friends engaging in

restrictive eating or excessive exercise, can increase the likelihood of adolescents in Ondo State developing disordered eating behaviours to fit in or seek approval from their peers. Also according to Adewuya et al. (2019), adolescents may experience social pressures to conform to unrealistic body ideals promoted by the media, peers, and society, leading to disordered eating behaviours. The finding on bullying and teasing, and abuse are in conformity Adewuya et al. (2019) who stressed that experiencing trauma or abuse, such as physical, emotional, or sexual abuse, can trigger disordered eating behaviours as a maladaptive coping mechanism among adolescents in Ondo State.

The result on the impacts of disordered eating behaviours on the wellbeing of adolescents in Ondo State presented in Table 2 identified thirteen (13) impacts. The impacts are decreased self-esteem and self-worth, malnutrition and nutrient deficiencies, negative impact on mental health, decreased academic performance, negative impact on physical health, decreased quality of life, increased risk of chronic diseases, increased risk of depression and anxiety, negative impact on sleep patterns, increased risk of substance abuse, decreased motivation and interest in activities, negative impact on overall wellbeing, and decreased self-confidence. The finding on negative impact on physical health is in support of Adegboye (2019) who stated that disordered eating behaviours among adolescents in Ondo State, Nigeria can result in negative effects on physical health, including poor nutrition, inadequate intake of essential nutrients, and increased risk of health problems such as obesity, malnutrition, and eating disorders. Disordered eating behaviours can lead to physical health problems, such as digestive problems, and electrolyte imbalances, among adolescents in Ondo State (Adepoju & Oyewole, 2018).

The result on mental health issues aligns with Ezeh et al., (2020) who pointed out that disordered eating behaviours can contribute to mental health issues, such as depression, anxiety, and low self-esteem, among adolescents in Ondo State. Also, the result on decreased academic performance is in line with Ogunlesi (2018) who noted that disordered eating behaviours can have a detrimental effect on academic performance among adolescents in Ondo State, Nigeria, leading to decreased concentration, cognitive impairment, and poor school attendance. Disordered eating behaviours can negatively impact on academic performance, as adolescents may experience fatigue, difficulty concentrating, and decreased motivation, ultimately affecting their academic wellbeing (Ogunba & Oyewole, 2020).

The findings on the roles of nutrition education in preventing disordered eating among adolescents in Ondo State presented in Table 3 identified twelve (12) roles; they are promoting healthy eating habits in adolescents, supporting healthy weight management, educating on nutrition and mental health, providing guidance on healthy snacking habits, teaching nutrition labeling skills, promoting cultural and social norms that support healthy eating, educating on the dangers of dieting and restrictive eating, promoting flexible eating habits, encouraging students to try new foods, teaching meal planning skills, providing resources for disordered eating treatment, and encouraging open communication about food and body concerns. The finding on promoting healthy food choices shows support with Ezeh et al. (2020) who buttressed that nutrition education promotes healthy food choices among adolescents in Ondo State, Nigeria. According to Ezeh et al. (2020), by teaching students about the importance of fruits, vegetables, whole grains, and lean proteins, they can make healthy food choices and avoid unhealthy foods which could result to disordered eating behaviour. Adepoju and Oyewole (2018) also added that nutrition education plays a crucial role in promoting healthy eating habits among adolescents by providing accurate and relevant nutrition information which enable adolescents to make informed food choices and develop healthy eating habits. Furthermore, the finding is in line with Ogunba and Oyewole (2020) who noted that nutrition education can help prevent dieting and disordered eating among adolescents by promoting a healthy relationship with food and their bodies.

By focusing on overall health and well-being rather than weight loss, adolescents can develop a positive body image and reduce their risk of developing disordered eating (Ogunba & Oyewole, 2020). In addition, the finding on promoting positive body image aligns with Adepoju and Oyewole (2018) who stated that nutrition education can promote positive body image among adolescents by focusing on overall health and well-being rather than weight loss. By promoting a healthy relationship with food and their bodies, adolescents can develop a positive body image and reduce their risk of developing disordered eating (Adepoju & Oyewole, 2018).

5. CONCLUSION

This study investigated the role of nutrition education in preventing disordered eating among adolescents in Ondo State, Nigeria. The findings indicate that nutrition education is a critical factor in preventing disordered eating among adolescents. Nutrition education plays a crucial role in preventing disordered eating among adolescents in Ondo State, Nigeria. By providing adolescents with the necessary knowledge and skills to make healthy food choices, nutrition education can help promote positive eating behaviours and prevent the development of eating disorders. From the result, it was concluded that nutrition education plays a crucial role in preventing disordered eating by promoting positive eating behaviours in adolescents.

6. RECOMMENDATIONS

Based on the findings of this study, the following recommendations are made:

- a) Ondo State government should develop and implement nutrition education programmes in schools and community settings to educate adolescents on healthy eating habits and the risks of disordered eating
- b) Involve parents, teachers, and healthcare providers in the delivery of nutrition education programs to ensure a holistic approach to preventing disordered eating.
- c) Conduct further research to evaluate the effectiveness of nutrition education programs in preventing disordered eating among adolescents in Ondo State, Nigeria.
- d) Provide secondary school teachers in Ondo State especially those teachers in Home Economics and Food and Nutrition training on nutrition education to enable them to effectively teach nutrition education to secondary school students. This can be achieved through workshops, seminars, and online courses.

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