# The Effect of School Food Environment on Consumption of Sugar-Sweetened Beverages Among Adolescents in Selected Secondary Schools in Ibadan, Nigeria 

Olaitan Bobade ${ }^{1}$, Afusat Ozoh ${ }^{2}$<br>${ }^{1}$ Intern Dietitian, Dietetics Department, University College Hospital, Ibadan, Oyo state, Nigeria.<br>${ }^{2}$ Chief Dietitian, Dietetics Department, University College Hospital, Ibadan, Oyo state, Nigeria.<br>Corresponding Author: Olaitan Bobade

DOI: https://doi.org/10.52403/ijhsr. 20220627


#### Abstract

Background: Consumption of sugar-sweetened beverages is a behaviour commonly shared among adolescent friendship groups especially in schools, where there is a high availability of such beverages. Due to the likelihood for this dietary habit to continue into adulthood, adolescents should be targeted for interventions to decrease sugar-sweetened beverages intake. This study investigated how the school environment impacts the consumption pattern of sugar-sweetened beverages in adolescents in selected secondary schools in Ibadan, Nigeria. Methods: A descriptive cross-sectional design was conducted among 100 adolescents from 2 secondary schools. Consumption pattern of sugar-sweetened beverages was collected via a self-administered questionnaire. Data on exposure to sugar-sweetened beverages was collected by the interviewer. Carbonated soft drinks and fruit drinks were the only sugar-sweetened beverages categories assessed. Descriptive statistics was used to analyze data with significance judged at $\mathrm{p}<0.05$. Results: There was high exposure to sugar-sweetened beverages within the school food environment. Carbonated soft drink was the more frequently consumed beverage. Majority ( $67.1 \%$ ) of the respondents consumed either of the two sugar-sweetened beverages at least 7 times in a week. However, when comparing frequency and location of consumption, both beverages were individually consumed more frequently outside school. Overall, there was no significant association between the school-food environment and sugar-sweetened beverages consumption pattern. Conclusion: Consumption of sugar-sweetened beverages among adolescents may be associated with other environmental influences outside schools. Public health nutrition interventions to reduce consumption of sugar-sweetened beverages among adolescents should not be limited to schools alone.


Keywords: Sugar-sweetened beverages, adolescents, school food environment

## INTRODUCTION

Growing up typically comes with a shift in dietary preferences and behaviours. Adolescence, however, is a critical time in the establishment of life-long eating patterns, and important environmental influences for adolescents' dietary behaviours such as availability and accessibility (i.e. physical environmental factors) may influence these
dietary patterns. [1] Sugar-sweetened beverages (SSBs) refer to a variety of beverages that contain added sugars such as fruit drinks, carbonated drinks, sports drinks, energy drinks, flavoured milk drinks, and sweetened coffees or teas. [2] These beverages have been found to be a major source of added sugars and energy in the diet of adolescents and they often give zero
nutritional value. ${ }^{[2]}$ Also, they are a causative factor for obesity and many chronic noncommunicable diseases. ${ }^{[3]}$ Consumption of these SSBs is a behaviour commonly shared among adolescent friendship groups, with the strongest similarities in schools where there is a high availability of soft drinks. ${ }^{[4]}$ The school food environment comprises of the facilities on the school ground, in which food and beverages are sold or made available, as well as similar facilities within the school neighbourhood. ${ }^{[2]}$ An association has been identified between the consumption of sugar-sweetened beverages and the access to food retailers in the school neighbourhood. ${ }^{[5]}$ A 2018 study found that adolescents who purchase meals or snacks from food outlets at school (e.g. cafeterias) and off school property (e.g. fast food, restaurants, and other convenience stores close to the school) had a higher rate of consuming sugar-sweetened beverages than those who did not make such purchases. ${ }^{[6]}$

Multiple studies have found the school food environment to be a huge predictor of the consumption pattern of sugar-sweetened beverages amongst adolescents. ${ }^{[7]}{ }^{[8]}$ In contrast, some other studies found that the school food environment had little to negligible impact on sugar-sweetened beverages consumption. ${ }^{[2]}$ [9] Furthermore, a study conducted in Southern Nigeria reported that $97.2 \%$ of adolescent subjects consumed at least one bottle of soft drink a day even though the presence of a soft drinks vending shop in the school did not appear to influence consumption. ${ }^{[10]}$ In Ibadan North local government area, there is limited research on the effect of the school food environment on the consumption of sugar-sweetened beverages amongst adolescents. This study sought to bridge this knowledge gap by investigating how the school food environment affects the consumption pattern of sugar-sweetened beverages among adolescents in Ibadan, Oyo state, Nigeria.

## MATERIALS \& METHODS

A descriptive cross-sectional design was adopted for this study. A convenient sample size of 100 was employed. The study was carried out in 2 selected 'day' secondary schools in Ibadan North local government area of Oyo state, Nigeria. The study respondents were secondary school students between the ages 10-19 years old. A multistage sampling technique was used
Stage one: A simple random sampling technique was used to select 2 secondary schools within the study location.
Stage two: A systematic random sampling was used to select respondents from each class in the participating secondary schools.

## Ethical approval/Informed consent

Ethical clearance was obtained from the University of Ibadan/University College Hospital Ethical Committee. Informed consent was obtained from participants via consent and assent forms.

## Data collection <br> Questionnaire

A self-administered questionnaire was used to collect data from the respondents. A well-structured questionnaire was used to collect information on the personal characteristics of the respondents. Questions from the beverage and snack questionnaire were adapted and modified to collect data on the sugar-sweetened beverage intake and consumption pattern of the respondents. ${ }^{[11]}$

Data on the exposure of the students to sugar-sweetened beverages within and around the school premises was collected by the interviewer. Exposure to sugarsweetened beverages within and around the school environment was defined by

1. The presence of any facility that sells SSBs inside the school and in the surrounding neighbourhood
2. The presence of structures sponsored by an SSB brand e.g. a kiosk or a building plastered with promotional wallpapers or materials for that brand

## Anthropometric measurements

The anthropometric measurements of the respondents were taken following the WHO standard. Weight was measured using a portable well-calibrated digital weighing scale. Respondents were told to remove items that could over-estimate their weight before weighing. The height measurement was taken using a tape rule. Respondents were told to stand with their scapula, buttocks, and heels touching the wall with the head adjusted to be in its natural nonstretched position.

## Statistical Analysis

Descriptive statistics such as percentage and frequencies were used to present the results of demographic characteristics, exposure to sugar-sweetened beverages, and frequency of sugarsweetened beverage intake. Continuous variables of age, anthropometric measurements and average daily allowance were analyzed descriptively using mean $\pm$ standard deviation and range. Association between frequency of intake and most probable location of consumption, perceived reasons for consumption, probable time of consumption and nutritional status was assessed using inferential statistics; Pearson chi-square analysis at $5 \%$ level of significance. Data was statistically analyzed
using the Statistical Product and Service Solutions (SPSS) windows software, version 20.0.WHO AnthroPlus was used to determine BMI-for-age of the respondents using the weight, height, and age variables.

## RESULT

The frequency of consumption of sugar-sweetened beverages by the respondents in a typical week is summarized in Table 1. Considering carbonated soft drink (CSD) consumption at school, those who did not consume it were the most ( $31.2 \%$ ), followed by those who did but for only 2 to 4 times per typical week ( $29.0 \%$ ). On the other hand, when considering CSD intake at places besides school, those who consumed CSD once per week were the most ( $28.4 \%$ ). In total, $23 \%$ of the respondents reported consuming CSD at least once per day in school, while $15.9 \%$ reported drinking it in places other than school at the same rate.

Considering fruit drink (FD) in school, two in every three (66.7) of the respondents did not consume it in school while those that did mostly did once per week (14.4\%). The proportion was more evenly distributed when considering fruit drink consumed out of school, as only $34.1 \%$ did not consume it, while $30.7 \%$ and $19.3 \%$ took it once and 2 through 4 times per week respectively.

Table 1: Respondents' frequency of consumption of SSBs

|  | Frequency of consumption |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Never | Once/week | $\mathbf{2 - 4}$ times/week | $\mathbf{5 - 6}$ times/week | Once/day | $\mathbf{2 - 3}$ times/day | $\mathbf{\geq 4}$ times/day |
| CSD at school <br> $(\mathrm{N}=93)$ | $29(31.2)^{*}$ | $10(10.8)$ | $27(29.0)$ | $5(5.4)$ | $18(19.4)$ | $4(4.3)$ | $0(0)$ |
| CSD not at school <br> $(\mathrm{N}=88)$ | $24(27.3)$ | $25(28.4)$ | $16(18.2)$ | $9(10.2)$ | $8(9.1)$ | $5(5.7)$ | $1(1.1)$ |
| FD at school <br> $(\mathrm{N}=90)$ | $60(66.7)$ | $13(14.4)$ | $4(4.4)$ | $1(1.1)$ | $11(12.2)$ | $1(1.1)$ | $0(0)$ |
| FD not at school <br> $(\mathrm{N}=88)$ | $30(34.1)$ | $27(30.7)$ | $17(19.3)$ | $3(3.4)$ | $9(10.2)$ | $1(1.1)$ | $1(1.1)$ |

*N (\%) CSD - Carbonated Soft Drinks; FD - Fruit Drink

Respondents' exposure to sugarsweetened beverages is shown in Table 4.2. Almost all the respondents ( $92 \%$ ) reported that they consume carbonated soft drinks. Likewise, four in every five of the respondents ( $79.8 \%$ ) reported their usual consumption of fruit drinks. The respondents largely considered thirst as the reason for
consuming sugar-sweetened beverages (44.6\%). However, influence of classmates and parents ( $22.8 \%$ ) and accessibility of SSBs (21.7\%) were notable considerations. Also, more than two out of every three ( $68.7 \%$ ) of the adolescents reported home as the most likely location to consumed SSB
while club is the least ( $1.0 \%$ ) of the likely locations.

More than half of the respondents $(52 \%)$ reported that they were more likely to consume sugar-sweetened beverages during lunch break. A similar proportion (54.5\%)
reported that they consumed items brought from home during lunch break. By and large, $72.2 \%$ of the respondents reported their awareness of the nutritional impacts of consuming SSB.

Table 2: Respondents' Exposure to Sugar-Sweetened Beverages

|  |  | $\mathbf{N}(\%)$ |
| :--- | :--- | :--- |
| Carbonated Soft Drinks (CSD) Consumption (N = 100) | No | $8(8.0)$ |
|  | Yes | $92(92.0)$ |
| Fruit Drink (FD) Consumption | No | $20(20.2)$ |
| $(\mathrm{N}=99)$ | Yes | $79(79.8)$ |
| Reasons for consuming SSB | Influence of parents/friends | $21(22.8)$ |
| $(\mathrm{N}=92)$ | Accessibility | $20(21.7)$ |
|  | To quench thirst | $41(44.6)$ |
|  | Others | $10(10.9)$ |
| Most likely location to take SSB | At home | $68(68.7)$ |
| $(\mathrm{N}=99)$ | At school | $12(12.1)$ |
|  | Party | $7(7.1)$ |
|  | Market | $4(4.0)$ |
|  | Club | $1(1.0)$ |
|  | Combination of the locations | $2(2.0)$ |
|  | Others | $5(5.1)$ |
|  | In the morning | $13(13.3)$ |
| Most likely time to take SSB | During lunch break | $51(52.0)$ |
| $(\mathrm{N}=98)$ | After classes | $13(13.3)$ |
|  | Anytime | $3(3.1)$ |
|  | Anytime besides mornings | $3(3.1)$ |
|  | Food/Snack brought from home | $54(54.5)$ |
| Items consumed during lunch break | Food/Snack bought in school | $36(36.4)$ |
| $(\mathrm{N}=99)$ | None | $8(8.1)$ |
|  | Food/Snack obtained in from both | $1(1.0)$ |
|  | $27(27.8)$ |  |
| Awareness of the nutritional impact of consuming SSB $(\mathrm{N}=97)$ | No | $70(72.2)$ |
|  |  | Yes |

N (\%) - Frequency (Percentage);

The frequency of total sugar-sweetened beverage consumed by the respondents is shown in Table 3. More than three out of every five of the respondents (61.3\%) consumed carbonated soft drink only frequently (i.e. at least 5 times per week) while $44.6 \%$ consumed fruit drink at the same rate. Total sugar-sweetened beverage was more frequently consumed among the respondents, as $67.1 \%$ had frequent intake (of at least 7 times per week).

Table 3: Frequency of Total Sugar-Sweetened Beverage Consumption by the Respondents

|  | Consumption <br> Frequency |  |  |
| :--- | :---: | :---: | :---: |
|  | Infrequent | Frequent | Total |
| Carbonated Soft Drink $^{1}$ | $31(38.8)^{*}$ | $49(61.3)$ | 80 |
| Fruit Drink $^{1}$ | $36(55.4)$ | $29(44.6)$ | 65 |
| Total Sugar-Sweetened <br> Beverage $^{2}$ | $25(32.9)$ | $51(67.1)$ | 76 |

* (\%)
${ }^{1}$ For Carbonated Soft Drink and Fruit Drink, frequent intake $=$ at least 5 times per week
${ }^{2}$ For Total Sugar-Sweetened Beverage, frequent intake $=$ at least 7 times per week

Table 4 summarizes the anthropometric measurement and the anthropometric index of the respondents. The average weight of the adolescent respondents was 48.5 kilograms ( $\mathrm{SD}=9.63$ ) while mean height was 1.59 meters ( $\mathrm{SD}=0.09$ ). The BMI-forAge of the respondents showed that nearly all $(95.6 \%)$ the respondents were within normal BMI range. Only $4.4 \%$ were underweight while none was overweight.

Table 4: Anthropometric Measurements and Index of Respondents

| $\mathbf{N}=\mathbf{1 0 0}$ |  | $\mathbf{N}(\%)$ |
| :--- | :--- | :---: |
| Weight $(\mathrm{kg})$ | Mean $\pm$ SD | $48.50 \pm 9.63$ |
| Height $(\mathrm{m})$ | Mean $\pm$ SD | $1.59 \pm 0.09$ |
| BMI-for-Age ( $\mathrm{N}=91)$ | Underweight | $4(4.4)$ |
|  | Normal | $87(95.6)$ |

Table 5 shows the association between the common location of consumption of sugarsweetened beverage and the frequency of intake. Though respondents who reported home and school as the most common
locations of consuming carbonated soft drinks were more in the frequent intake group ( $66.1 \%$ and $55.6 \%$ respectively) than the infrequent category ( $33.9 \%$ and $44.4 \%$ respectively), this is not statistically significant ( $\mathrm{p}=.272$ ). Likewise, fruit drink intake, which was reported to have been consumed more frequently ( $60.0 \%$ ) than not
(40.0\%) by respondents who indicated school as their probable location of consumption, was not associated with location of consumption ( $p=.214$ ). Hence, there was no association between frequency of intake of total sugar-sweetened beverage and the most probable location of consumption.

Table 5: Association Between Common Location of Consumption and Frequency of Sugar-Sweetened Beverage Intake

|  | Common location of consumption | Frequency of Consumption |  | $\boldsymbol{P}$-value* |
| :--- | :--- | :---: | :---: | :---: |
|  |  | Infrequent | Frequent |  |
| CSD Intake | Home | $19(33.9)$ | $37(66.1)$ | .272 |
| $(\mathrm{~N}=77)$ | School | $4(44.4)$ | $5(55.6)$ |  |
|  | Other places besides home/school | $7(58.3)$ | $5(41.7)$ |  |
| Fruit Drink Intake | Home | $23(52.3)$ | $21(47.7)$ | .214 |
| $(\mathrm{~N}=62)$ | School | $2(40.0)$ | $3(60.0)$ |  |
|  | Other places besides home/school | $10(76.9)$ | $3(23.1)$ |  |
| Total SSB Intake | Home | $17(33.3)$ | $34(66.7)$ | .493 |
| $(\mathrm{~N}=73)$ | School | $2(22.2)$ | $7(77.8)$ |  |
|  | Other places besides home/school | $6(42.6)$ | $7(42.6)$ |  |

CSD - Carbonated Soft Drink; SSB - Sugar-Sweetened Beverage

* $X^{2}, P$-value $<0.05$

Relationship between frequency of consumption of sugar-sweetened beverage intake and the perceived reasons of consuming it is summarized by Table 6 . There was no relationship found between carbonated soft drink intake frequency and perceived reasons for consuming it by the respondents $(\mathrm{p}=.298)$. However, there was a relationship between frequency of consumption of fruit drink and perceived reasons ( $\mathrm{p}=.009$ ), as respondents who considered accessibility as the main reason
for consuming fruit drink were significantly more in the frequent category ( $83.3 \%$ ) than infrequent category ( $16.7 \%$ ), while influence of friends/parents, quenching thirst and other reasons had significantly higher respondents in the infrequent groups ( $53.6 \%, 67.9 \%$ and $85.7 \%$ respectively) than the frequent group.

Overall, total sugar-sweetened beverage intake frequency was not associated with perceived reason for consumption among the respondents ( $\mathrm{p}=$ .324)

Table 6: Association Between Perceived Reasons and Frequency of Sugar-Sweetened Beverage Intake

|  | Perceived Reasons |  |  |  |  |  | Frequency of Consumption |  |  |  |  | $\boldsymbol{P}$-value* |
| :--- | :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  | Infrequent | Frequent |  |  |  |  |  |
| CSD Intake | Influence of mates/friends/parents | $11(57.9)$ | $8(42.1)$ | .298 |  |  |  |  |  |  |  |  |
| $(\mathrm{~N}=74)$ | Accessibility | $6(40.0)$ | $9(60.0)$ |  |  |  |  |  |  |  |  |  |
|  | To quench thirst | $11(34.4)$ | $21(65.6)$ |  |  |  |  |  |  |  |  |  |
|  | Other reasons | $2(25.0)$ | $6(75.0)$ |  |  |  |  |  |  |  |  |  |
| Fruit Drink Intake | Influence of mates/friends/parents | $7(53.6)$ | $6(46.4)$ | .009 |  |  |  |  |  |  |  |  |
| $(\mathrm{~N}=60)$ | Accessibility | $2(16.7)$ | $10(83.3)$ |  |  |  |  |  |  |  |  |  |
|  | To quench thirst | $19(67.9)$ | $9(32.1)$ |  |  |  |  |  |  |  |  |  |
|  | Other reasons | $6(85.7)$ | $1(14.3)$ |  |  |  |  |  |  |  |  |  |
| Total SSB Intake | Influence of mates/friends/parents | $9(45.0)$ | $11(55.0)$ | .324 |  |  |  |  |  |  |  |  |
| $(\mathrm{~N}=71)$ | Accessibility | $2(15.4)$ | $11(84.6)$ |  |  |  |  |  |  |  |  |  |
|  | To quench thirst | $11(36.7)$ | $19(63.3)$ |  |  |  |  |  |  |  |  |  |
|  | Other reasons | $2(25.0)$ | $6(75.0)$ |  |  |  |  |  |  |  |  |  |

CSD - Carbonated Soft Drink; SSB - Sugar-Sweetened Beverage

* $X^{2}, P$-value $<0.05$. Bold $P$-value indicates statistical significance


## DISCUSSION

In this study, the prevalence of those who consumed carbonated soft drinks was higher than that of fruit drinks, corresponding with the findings of Godin et
al., who reported that soft drinks was the SSB category consumed most frequently among adolescents. ${ }^{[2]}$ This is likely due to the fact that carbonated beverages constitute the major part of the worldwide soft drinks
industry and they are often advertised in a way that is attractive to younger customers. ${ }^{[12]}$ This disparity between the prevalence of both SSB types could also be due to the higher selling price of fruit drinks as compared to carbonated soft drinks. Interestingly, this study found that the most frequent consumption of sugar-sweetened beverages was in the $30.7 \%$ of respondents who consumed fruit drinks outside of school once a week. This may be due to a perception that fruit drinks are good for the health whereas they contain added sugars in high amounts which is detrimental to the health.

Quenching thirst was the most common reason for which most of the respondents consumed SSBs. This result is in line with a previous study where majority of respondents reported that they consume sugar-sweetened beverages because of its good taste and how refreshing it is. ${ }^{[13]}$ The influence of parents was also evident in this study as it was the second most common reason why adolescents in this study reported they consume sugar-sweetened beverages. This is probably because parents serve as role models and facilitators in impacting children's diets. ${ }^{[14]}$

In this study, the presence of SSBs in the schools was primarily through products being sold. The two schools used in this study had at least two tuck shops where sugar-sweetened beverages were readily accessible. Neither of the schools displayed advertisement or promotional materials of SSBs and none of the kiosks or tuck shops were sponsored by the SSB industry. Additionally, both schools ran a closedcampus policy which means that students were unable to leave the school premises during lunch breaks. This implies that the respondents' exposure to sugar-sweetened beverages in the school environment was restricted to those available within the school. Considering this accessibility and availability in both schools, it is clear that the school food environment favored the exposure of the adolescents to sugarsweetened beverages.

However, despite this exposure within the school premises, less than onefifth of the respondents reported school as the location they were more likely to consume sugar-sweetened beverages. This result is corroborated by that of Ansa et al., who reported that Nigerian adolescents who attended schools without a vending shop that sold soft drinks consumed at least one bottle of soft drink per day more than those in schools with a vending shop. ${ }^{[10]}$ Conversely, Angie et al., reported that teenage students whose schools had stores that sold high calorie, low nutrient beverages and purchased them reported one-third of a serving higher intake of sugar-sweetened beverages than those attending a school without a store selling such items on a particular day. ${ }^{[8]}$ In fact, majority of the respondents reported that they were more likely to consume sugar-sweetened beverages at home, consistent with that of a previous study. ${ }^{[15]}$ The high consumption of sugar-sweetened beverages at home could be due to lack of parental rules that limit the consumption of SSBs especially seeing as this present study found that more than half of frequent SSBs drinkers did so due to influence of third-parties, parents being one of them. Furthermore, parents/guardians are often responsible for purchasing and preparing foods, giving them considerable control over what foods/beverages are available at home. ${ }^{[2]}$

This study found no association between the frequency of consumption of sugar-sweetened beverages and the most probable location of consumption. Additionally, when considering the association between the perceived reason for consuming carbonated soft drinks and the frequency of doing so, this study found no relationship. For fruit drinks, on the other hand, there was a relationship between frequency of consumption and perceived reasons for consumption. The respondents who considered accessibility as their main reason for consuming fruit drinks were significantly more in the frequent category than infrequent category. This is notable
considering the fact that many of the respondents stated that they were more likely to consume fruit drinks outside of school. This could be the case because as stated earlier, fruit drinks typically have a higher selling price than carbonated soft drinks, and so, it will likely be more accessible outside of school where someone else, possibly a parent or guardian may be responsible for making the purchase. Furthermore, because of the higher selling price of fruit drinks, SSBs retailers in the schools had more carbonated soft drinks for sale, than they did fruit drinks.

Overall, this study found no significant association between the schoolfood environment and SSB consumption in the adolescents. Similar findings have also been reported in other studies. ${ }^{[9]}{ }^{[16]}$ The ubiquity of these SSBs could explain this finding as adolescents have countless ways to obtain SSBs through supermarkets, stores, fast-food restaurants, and other food outlets in their community. Also, SSBs are usually heavily advertised, marketed and particularly targeted towards the adolescence age group. [17]

In adolescents, the high intake of SSBs has been consistently linked to overweight and obesity. ${ }^{[18]}$ In this study, though, the BMI-for-Age of the respondents showed that despite high consumption of SSBs, nearly all the respondents were within normal body mass index (BMI) range. This aligns with a previous study conducted amongst Nigerian adolescents where the prevalence rates of obesity and overweight were low and the quantity of soft drinks consumed was found to have no significant effect on this prevalence. ${ }^{[10]}$ In contrast, Mâsse et al., found that access to SSBs at school and their consumption were both associated with obesity in adolescents. ${ }^{[19]}$ Although physical activity was unaccounted for in this present study, the absence of overweight or obese respondents may be attributed to the high physical activity level that is typically present in the adolescence population. Various studies conducted amongst Nigerian adolescents have reported
their physical activity level to be between moderate and high on most days of the week. [10] [20]

Majority of the respondents of this study reported that they were aware of the nutritional impacts of consuming SSBs. This tallies with the findings of another study where the consumption of sugar-sweetened beverages was high among adolescent students despite moderate level of nutritional knowledge by most of them. ${ }^{[21]}$ This depicts a need to not only conduct nutrition education on the detrimental impacts of sugar-sweetened beverages but to also back it up by restricting and limiting access to these beverages.

The findings of this study is important because it illustrates the fact that environmental influences are more of risk predictors, than they are causative factors for individuals' dietary behaviors. This present study, however, has some limitations. First, the study did not make use of a large pool of respondents. Secondly, it is important to note that this study assessed the intake of sugarsweetened beverages over a week which may have given rise to respondent burden and recall bias. Lastly, this study did not comprehensively examine all the categories of sugar-sweetened beverages consumed in the study location.

## CONCLUSION

There was a high exposure to sugarsweetened beverages in the school food environments assessed in this study, and a corresponding frequent SSBs consumption amongst the respondents. However, there was no significant association between the exposure to SSBs in the school food environment and SSB consumption pattern. Hence, public health nutrition policies and interventions to reduce consumption of SSBs and promote healthy dietary patterns amongst adolescents should be implemented not only in school, but also in other settings at home, and in the community.

Furthermore, the consumption of healthy alternatives such as water, unsweetened dairy products, $100 \%$ fruit and
vegetable juices and smoothies should be widely encouraged through nutrition education to both adolescents and their parents.

Acknowledgement: The authors appreciate all the participants of this research study

Conflict of Interest: The authors declare no conflict of interest

## Source of Funding: None

## Ethical Approval: Approved

## REFERENCES

1. Hagan J, Shaw J, Duncan P. Bright futures: Guidelines for health supervision of infants, children, and adolescents. 3rd ed. Illinois: American Academy of Pediatrics; 2008.
2. Godin K, Chaurasia A, Hammond D, et al. Examining associations between school food environment characteristics and sugarsweetened beverage consumption among Canadian secondary-school students in the COMPASS study. Public Health Nutrition. 2018;22(11):1928-1940.
3. Rosinger A, Herrick K, Gahche J, et al. Sugar-sweetened Beverage Consumption Among U.S. Adults, 2011-2014. NCHS Data Brief. 2017;(270):1-8.
4. Wouters EJ, Larsen JK, Kremers SP, et al. Peer influence on snacking behavior in adolescence. Appetite. 2010;55(1):11-17.
5. Wiecha JL, Finkelstein D, Troped PJ, et al. School vending machine use and fast-food restaurant use are associated with sugarsweetened beverage intake in youth. J Am Diet Assoc. 2006;106(10):1624-1630.
6. Godin KM, Chaurasia A, Hammond D, et al. Food Purchasing Behaviors and SugarSweetened Beverage Consumption among Canadian Secondary School Students in the COMPASS Study. J Nutr Educ Behav. 2018;50(8):803-812.e1.
7. Johnson DB, Bruemmer B, Lund AE, et al. Impact of school district sugar-sweetened beverage policies on student beverage exposure and consumption in middle schools. J Adolesc Health. 2009;45(3 Suppl):S30-S37.
8. Linares A, Rider C, Mitchell P, et al. Education, Diet, and Environmental Factors

Influence Sugar-Sweetened Beverage Consumption among California Children, Teens, and Adults - Public Health Institute [Internet]. Public Health Institute. 2012 [cited October 2020]. Available from: https://www.phi.org/thought-
leadership/education-diet-and-environmental-factors-influence-sugar-sweetened-beverage-consumption-among-california-children-teens-and-adults/
9. Park S, Blanck HM, Sherry B, et al. Factors associated with sugar-sweetened beverage intake among United States high school students. J Nutr. 2012;142(2):306-312.
10. Ansa VO, Anah MU, Ndifon WO. Soft drink consumption and overweight/obesity among Nigerian adolescents. Global Heart. 2008;3(4):191-6.
11. US Department of Agriculture. Beverage and Snack Questionnaires (BSQ) [Internet]. USDA SNAP-Ed Connection. 2010 [cited September 2020]. Available from: https://snaped.fns.usda.gov/library/materials /beverage-and-snack-questionnaires-bsq
12. Abdelazim SA, Masoud MR, Youssif MR. Micronutrients for natural carbonated and noncarbonated soft drink. J Nutr Health Food Eng. 2017;7(1):204-212
13. Bipasha M, Raisa T, Goon S. Sugar Sweetened Beverages Consumption among University Students of Bangladesh. International Journal of Public Health Science (IJPHS). 2017;6(2):157.
14. van de Gaar V, van Grieken A, Jansen W, et al. Children's sugar-sweetened beverages consumption: associations with family and home-related factors, differences within ethnic groups explored. BMC Public Health. 2017;17(1):195.
15. Briefel R, Wilson A, Gleason P. Consumption of Low-Nutrient, EnergyDense Foods and Beverages at School, Home, and Other Locations among School Lunch Participants and Nonparticipants. Journal of the American Dietetic Association. 2009;109(2):S79-S90.
16. Williams J, Scarborough P, Matthews A, et al. A systematic review of the influence of the retail food environment around schools on obesity-related outcomes. Obesity Reviews. 2014;15(5):359-374.
17. Cairns G, Angus K, Hastings G, et al. Systematic reviews of the evidence on the nature, extent and effects of food marketing

Olaitan Bobade et.al. The effect of school food environment on consumption of sugar-sweetened beverages among adolescents in selected secondary schools in Ibadan, Nigeria
to children. A retrospective summary. Appetite. 2013;62:209-215.
18. Dereń K, Weghuber D, Caroli M, et al. Consumption of Sugar-Sweetened Beverages in Paediatric Age: A Position Paper of the European Academy of Paediatrics and the European Childhood Obesity Group. Annals of Nutrition and Metabolism. 2019;74(4):296-302.
19. Mâsse L, de Niet-Fitzgerald J, Watts A, et al. Associations between the school food environment, student consumption and body mass index of Canadian adolescents. International Journal of Behavioral Nutrition and Physical Activity. 2014;11(1):29.
20. Lateef O, Njogu E, Kiplamai F, et al. Determinants of Overweight and Obesity Among Adolescent Students in Public

Secondary Schools in Kwara State, Nigeria. Current Research in Nutrition and Food Science Journal. 2016;4(2):96-106.
21. Mmbaya FK, Waudo J, Mwangi S, et al. Nutrition Knowledge and Consumption of Sugar Sweetened Beverages among High School Students in Kenya. J Pub Health Nutri. 2020; 3(1):212-216

How to cite this article: Olaitan Bobade, Afusat Ozoh. The effect of school food environment on consumption of sugar-sweetened beverages among adolescents in selected secondary schools in Ibadan, Nigeria. Int J Health Sci Res. 2022; 12(6):205-213.
DOI: https://doi.org/10.52403/ijhsr. 20220627

