

Eating Habits of College Students: Home Cooked Vs. Takeaway Meals

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ABSTRACT

College students' preference for takeout over home-cooked meals, are linked to an increase in obesity, vitamin deficiencies, and metabolic hazards. This study examines the eating habits of college students, specifically comparing the consumption of home-cooked meals versus takeaway foods. The study is motivated by the increasing prevalence of convenience foods among young adults and the associated health implications, such as higher intake of energy dense, nutrient-poor foods and the risk of non-communicable diseases. Using a cross-sectional approach, data were collected from 100 samples between the ages of 18 and 25 (50% male, 50% female) from the Jaipur National University college students to assess the frequency of home-cooked and takeaway meal consumption, alongside factors influencing food choices, including convenience, affordability, health consciousness, taste preferences, and peer influence. Among 100 college students, 42.5% indulged in home-cooked meals every day, while takeout was taken on average two to three times per month (34.9% infrequently, 33% weekly), with men exhibiting a greater preference. About 26.4% of respondents said their meals were balanced and healthy, 42% reported feeling fatigued after eating out, and 69.2% agreed that eating at home improves health; 43.3% spent an average of ₹500–1000 a week on takeaway, primarily via apps (44.8%). Takeout consumption was moderate: 44.8% used apps, and 33% regularly. Despite convenience limits, 60.4% of people planned to cook more at home, while 40.6% of people cooked infrequently (mean frequency ~2-3 times/week). There were gender differences: women prioritized eating healthily, while men preferred takeout. In addition to socio demographic variables including housing circumstances, the study highlights taste, nutrition literacy, and the college atmosphere as important determinants of students' food choices. By addressing these factors, this study contributes to public health strategies aimed at enhancing dietary behaviors and long-term health outcomes for young adults.

Keywords: Home Cooked Foods, Takeaway Meals, Young Adults, Eating Habits, Gender Difference.

Introduction

Home cooking is a multifaceted concept that encompasses various skills and behaviors and can be perceived in diverse ways. Diet is a reversible risk factor for non-communicable diseases. The food market has been serving the convenience requirement of consumers through the provision of a range of food items and meals, including takeaway, ready to eat, and restaurant meals. Home cooking (HC), to some extent, offers more control over food choice, and therefore, it is a viable target for public health policy and interventions for healthy eating habits. A number of studies have explored the relationship between HC and dietary factors, including dietary consumption and diet quality however, findings have been contradictory. For example, some studies show that HC is positively associated with increased consumption of fruits and vegetables, better diet quality, and greater compliance with dietary reference intakes (Yuan *et al.*, 2022). "Eating habits" can be defined as the manner in which an individual

consumes food, considering the types of food ingested, the volumes, and the timing of consumption. Wear informed that dietary habits affect their health. Consuming the quantity of foods that provide the optimal balanced diet between nutrition and energy that promotes adult metabolism and kid growth is known as healthy eating. Foods that are high in vitamins and minerals and low in fat, cholesterol, sugar, and sodium are examples of healthy foods. On the opposite end of the scale, unhealthy foods also known as junk food are any items that are not good for your health. To put it simply, managing one's food consumption is the key to developing healthy eating habits. Crucially, dietary habits are established early in childhood thus, it is essential to exercise caution to maintain a healthy lifestyle (**Wen et al., 2014**). The belief that there are gender disparities in food acquisition, preparation, and consumption is upheld by conventional knowledge derived from observations and experience. Evolution, as well as intra individual (biological or psychological) and extra individual (socioeconomic and cultural) variables, conditioned the sexes' variations in eating habits, food preferences, and nutritional strategies, as this review demonstrates. Women are more likely to believe in healthy eating, to be more involved in managing their weight, to eat in social settings and under pressure, and to be frustrated by their own eating habits, which is a reflection of increased social pressure and their attempts to lessen the enjoyment that comes from eating. Conversely, males are more likely to utilize nutritional supplements, eat sweet foods covertly while watching television, and frequent fast food restaurants (**Grzymisławska et al., 2020**). College students who are under pressure to perform well academically and find work are more likely to choose for easy takeout. A key factor in determining eating behavior, nutrition literacy (NL) is the ability to gather, process, and comprehend nutrition information as well as the skills necessary to make appropriate dietary decisions. It is considered a subset of health literacy. While those with low levels of NL might not be able to eat appropriately, leading to poor diet quality, those with high levels of NL would adhere to dietary standards to choose a healthy diet. As they adjust to college life, college students will unavoidably encounter a new setting for meal planning, preparation, and consumption. Although many college-aged students understand the significance of fulfilling nutritional requirements, their attitude and level of knowledge may prevent them from altering their behavior. Although a lot of other factors influence their choices, college students' understanding of nutrition does not always translate into them selecting healthful foods (**Abraham, S. et al., 2018**).

Materials and Method

The study "Eating Habits of College Students: Home Cooked vs. Takeaway Meals" employed a cross-sectional survey research design to analyze Jaipur National University students' eating patterns and their associated financial and cultural and health impacts. The study conducted campus based study to access university facilities and collect research materials from different academic departments. The research focused on undergraduate and graduate students who were enrolled at Jaipur National University in Jaipur Rajasthan. The 100 students were selected for the study on equal male and female participants to reduce bias while making male and female groups comparable. The study selected students through convenience sampling who were present at the time and wanted to take part in the research. The research study established its methodological framework through precise descriptions of its study design, target population, sample size, data collection process, and statistical analysis method. The face to face survey interviews were performed by using a standard paper questionnaire. The questionnaire included multiple sections that collected sociodemographic information about respondents, including their age, gender, year of study, living arrangements, family income, and BMI, and their eating habits, which included the frequency of takeout and home-cooked meal consumption and their reasons for food selection and their preferred food types and ordering methods. The survey gathered data on the patterns of people's consumption of takeaway and home-cooked meals, the motivations behind their takeout choices, and their awareness of the long-term health effects and nutritional value of takeout. The survey also asked additional questions about the amount of money students spend on food each month and how they assessed the impact of their eating habits on their health and academic performance. Respondents received the surveys right away, and they were then given the time to finish them so that their responses would be considered legitimate. The study used anthropometric information which included self reported BMI categories together with weight perception data to study the relationship between food patterns and nutritional status. By developing a systematic framework for data collection and aggregation, the study team created a system to process data. Basic statistical methods, such as frequency distribution and percentage analysis, were used to examine the responses. In order to assist viewers comprehend trends and make comparisons, the data is presented using tables and charts. The method employed achieve three objectives through its systematic approach to data collection and its

ability to achieve balanced demographic representation and its selected analytical methods which produced trustworthy results about how home-cooked meals and takeaway meals affect student health and financial well-being and their daily activities. The research findings received increased validity and credibility through the use of structured survey design together with standardized statistical methods. Before gathering their responses, gave participants an explanation of the study's goals and let them choose whether or not to participate. Because it has a tiny sample size and depends on participants providing their own information, the study produces few valid results. Only the college student sample employed in the study is affected by the study's findings other college students are not covered.

Results and Discussion

The study was conducted among 100 college students of Jaipur National University, aged between 18 - 25 years together with their social and economic factors. The sample achieved balanced representation because it contained equal numbers of male and female participants who made up 50 percent of the sample. The university setting produced results which showed that 63 percent of participants belonged to the 18 to 21 age group while 37 percent of participants fell within the 21 to 25 age range. The average mean age of the respondents was (20.4 ± 2.1) years. The academic level of the student body showed postgraduate students as the most numerous group with 24% of the total student population while pre-final students made up 23% of the total and final-year students accounted for 19% of the student body. Meal preppers require their kitchens to be easily accessible since they must be able to move around the area. According to the survey, 57.5% of participants were able to make meals on their own since they had full kitchen access. The study found that 15.1% of participants could only cook using microwaves and induction stoves, and 27.4% of individuals lacked any kitchen facilities. The total consumption of takeout food experienced a decline throughout the entire study period. The daily takeout consumption rate among people reached only 3.8% while 15.1% of people reported eating takeout two to three times per week and 33.0% of people said they did it once a week. The average takeaway consumption rate among participants showed (1.7 ± 1.3) times per week consumption. Responses regarding home meal preparation responsibilities revealed that parents and family members shared 46% of the work, while mess facilities handled 21%, people prepared their own meals 19% of the time, students shared cooking responsibilities with their roommates 8% of the time, and professional chefs or domestic staff prepared meals 6% of the time. People ate home-cooked meals more often than they ate takeout food. 42.5% of respondents reported consuming home-cooked meals every day and 23.0% reported doing so most days more than five times per week. The estimated average home-cooked meal frequency for the week was (4.6 ± 1.8) times. People's ability to eat and how they made their own food choices were greatly impacted by the various kitchen setups in their homes. Frequency of eating home-cooked meals demonstrated a high level of adherence to customary eating habits. Despite having access to modern food convenience options, this group appears to maintain traditional eating behaviors, as seen by the prevalence of regular home-cooked meal consumption (65.5% consuming everyday or most days). Compared to home-cooked meals, which exhibited stable patterns, takeaway consumption habits were more variable. The study group was highly dependent on outside food sources, as seen by the fact that 25% of participants ate takeaway food between two and seven times per week, whereas 34.9% of individuals ate it infrequently. The range of median weekly takeaway expenses, which ranged from ₹300 to ₹2000, revealed significant variations in consumption patterns and financial capability. According to the study's findings, 42.5 % of participants cited taste preference as the primary factor when deciding on their food choices. According to the survey, members of this category choose takeout meals based more on their tastes and food textures than on time constraints. The highest food preference rating, 36.8%, went to Indian traditional dishes. Fast food, including pizza and burgers, was ranked as the second most popular food option. Street food, Chinese/continental food, and bakery goods were rated at 11% and 6%, respectively. Because these foods reflect their cultural background, members of this community continue to eat the foods they have always preferred. People preferred online delivery services, according to the study's findings, as Zomato and Swiggy accounted for 44.8% of all meal orders, while direct restaurant ordering accounted for 35.2%. The study revealed that participants' methods for assessing the nutritional value of their diets varied. Of those surveyed, only 26.4% thought their food was nutritious and balanced, 55.7% thought it was "somewhat balanced," and 17.9% thought it was unbalanced. According to the survey, a large number of people had a partial or negative opinion of the quality of their diet, which makes nutrition programs a great opportunity to assist them. After eating, people who have unpleasant symptoms demonstrate that they are unable to effectively digest their food, which suggests that the nutritional value of their takeout meals is inadequate. There was broad agreement (79%) that cooking at

home is more cost-effective than ordering takeout, with 25.7% "agreeing" and 53.3% "strongly agreeing." The financial advantage of cooking at home was only disputed by 4.8% of respondents. Because 73% of participants stated they would cook more frequently at home if they could discover cheaper food options, people who cook at home spend less money on food. According to financial assistance study, the most majority (74%) had families that paid for food expenses primarily out of their own pockets, whereas 21.2% relied on their own income and only 5% were supported by scholarships. Cultural and family background influenced food preferences, with 58.1% of subjects reporting significant effects and 24.8% reporting minor effects. The fact that 17.1% of respondents said there was no cultural influence shows how important cultural considerations are when making food decisions. According to the survey, 39.4% of participants continued their usual eating habits during cultural and festival events, while 60.6% of participants increased their takeout orders. The decision to dine at restaurants was heavily influenced by friends, as 60% of respondents stated that friends occasionally affected their eating choices, 21.9% stated that friends typically influenced their decisions, and only 18.1% stated that friends had no influence at all. These study findings indicate that peer pressure has a major impact on college students' eating habits. While women learned more about healthy diet nutrition and were more likely to believe in nutritional balance, men were more likely to eat takeout than women. While men tended to choose fast food items, women tended to choose traditional Indian meals for takeout. While men were more likely to choose fast food products, women had a greater affinity for traditional Indian takeaway options. According to the survey, women prepared their own meals more frequently than men (36% vs. 8%), and they demonstrated a greater influence of cultural background on their dietary preferences. According to the study, students' understanding of the relationship between nutrition and academic performance was varied, with 44.8% reporting no influence, 33.3% reporting an improvement in academic performance, and 21.9% reporting genuine academic harm. Just 9.6% of respondents stated that home-cooked meals had no health benefits, but the majority, 69.2%, stated that they have significant health benefits. Additionally, 18.3% of respondents stated that home-cooked meals have some health benefits. In the survey, it was shown that 54.7% of participants did not make an effort to regulate their weight, 21.7% utilized both diet and exercise to do so, 14.2% used exercise alone, and 9.4% used diets alone.

Discussion

The current study examined the eating habits of college students, focusing on the frequency of handmade and takeaway meals. According to the study, the majority of students cook for themselves at home, but they usually order takeaway because it's more convenient and they like the taste, as well as because it fits with their friends, their shifting activities, and their academic obligations. The study's findings support previous research that indicates college students from their long term eating habits during this crucial time of transition. Students struggle to establish their independence as they transition from high school to college. Young adults go through a transitional stage in their lives that causes them to form lifelong health behaviors. College students gain weight as a result of their poor eating patterns, which include selecting meals depending on the availability of fast food and food pricing. Students at universities deal with a variety of issues that can lead to bad eating habits. Students make poor dietary choices because they lack basic information about healthy eating. Because they are more expensive, nutritious foods are more expensive than unhealthy ones, which students can afford. Students' academic responsibilities cause stress, which leads to altered eating habits. (Ansari et al., 2015). College provides students with their first opportunity to develop healthy habits that will benefit them as they enter adulthood. Although college is a period when students may decide to make dietary changes, recent research indicates that students are not adequately instructed on nutrition and how to maintain a healthy body weight (Amore et al., 2019). The study showed that students who ate meals prepared at home more frequently thought they were healthier and more nutrient-dense, which led to better health results. The study's findings are consistent with other studies that indicates cooking at home improves dietary adherence to dietary recommendations and increases consumption of fruits and vegetables. Research studies look into the relationship between HC and their dietary variables and how dietary factors, such as dietary intake and diet quality, affect it. HC improved with increasing consumption of fruits and vegetables, improved diet quality, and greater adherence to dietary reference intakes, according to certain studies. Diet is a modifiable risk factor that influences the emergence of non-communicable illnesses. To meet people's demands for convenience, the food business has been offering a variety of food items and meal options (such as grab and go, prepared meals, and restaurant meals). It was discovered that the items in issue had high levels of salt, saturated fats, and energy (Yuan et al., 2022, Lim et al., 2018). People who prepare their meals at home can choose their food components and meal

amounts and cooking techniques which helps them avoid eating too much saturated fat and sodium and added sugars (Llanaj et al., 2018). Respondents in the current research study considered home-cooked meals to be more affordable than takeaway options. This perception aligns with Miura and Turrell (2013), who observed that lower cost, healthier home prepared meals can mitigate socioeconomic disparities in diet quality. Economic factors continue to serve as the primary influence on food selections made by students who reside alone. The participants continued to eat a lot of takeout since they were aware of the nutritional advantages of home-cooked meals. Convenience, academic stress, late-night study habits, and peer pressure were shown to be the primary contributors in the study, as previously shown by researchers (Janssen et al., 2017; Qi et al., 2023). College students develop patterns of eating irregularly because they frequently skip meals and choose to consume energy dense snacks which require little effort to prepare (Javeed et al., 2021). The research data show that students select more takeaway food during their academic workload times which supports the findings of Da Silva Taques Vieira et al. The research of Sotaquirá et al., shows relationships between unhealthy eating and either their high stress levels and a change in daily routine (2022) young adults exhibit stress-related eating patterns, such as increased rates of snacking and fast food intake. The study results show that late night study habits and poor sleep schedules lead to increased takeaway consumption while previous research demonstrates that circadian disruption causes people to develop irregular dietary habits (Moscatelli et al., 2023). University life brings about lifestyle changes which create long-lasting behavioral shifts that extend into adult life. The current research found that taste served as the main factor which people used to choose their preferred takeaway food from restaurants. Takeaway foods which people find more delicious than their normal food choices lead to increased food consumption that results in weight gain over time. People who eat highly delicious foods on multiple occasions develop new taste preferences which make them choose foods with high energy content (Gonçalves et al. 2022). The study results show that taste preferences which control food choices lead college students to make food decisions that override their nutritional knowledge. The current research demonstrated that male students had higher rates of takeaway meal consumption than female students who prioritized their dietary choices and health status. According to Grzymisławska et al. (2020) the research shows that women place greater importance on their health status and weight management compared to men who choose to eat foods that contain high levels of calories and fast food products. Choi (2020) found that men and women showed different patterns of eating snacks and controlling their food intake. The identified differences exist because social and psychological factors together with body image issues and societal expectations drive human behavior. The study found that peer pressure and cultural background were the two most important factors which influenced eating decisions. Social modeling shows how people change their eating patterns to match their social environment according to Higgs and Ruddock (2020). The social facilitation effect leads students to select takeout food when they share meals with their classmates. Cultural and familial background showed influence on home-cooked meal preferences which supported the findings of Enriquez and Archila-Godinez's (2022) study that demonstrated food choices serve as indicators of social status and cultural awareness and personal identity. Family communication and customs function as factors which shape eating patterns during the time when people establish their independent living arrangements (Nicholas et al., 2018; Badger et al., 2019). The students who took part in this research study showed that their eating patterns had an impact on both their academic success and their physical wellbeing. The current research evidence shows that when people adopt better eating habits their cognitive abilities and mental health improve according to findings from Lolokote et al. The research findings show that bad eating practices lead to both depression symptoms and lower academic achievement according to Da Silva Taques Vieira et al. The research study discovered that people show their environmental waste awareness through their knowledge about takeaway packaging waste. The study supports the findings of Gallego-Schmid et al. who showed that single-use takeaway packaging creates an environmental burden. The increasing sustainability knowledge among students creates a chance to establish programs which will teach home cooking and sustainable environmental practices. Students displayed knowledge about healthy eating principles yet their actual eating behavior showed different results. The knowledge-to-practice gap has been extensively documented through various studies (Qi et al., 2023; Abraham et al., 2018). The complete implementation of improved dietary practices requires both environmental changes and structural systems to support people who receive traditional nutrition education. The results of the research show that using multi-component interventions which include taste modification and easy access to healthy food options and low cost options and student led educational programs and university dining facilities

will produce successful results. Universities provide an optimal setting for health promotion programs which aim to create lifelong healthy dietary habits(Kos et al., 2020).

Implication

The study results show important effects on university student health policies and nutrition outreach programs. The students understand that cooking at home provides them with health benefits and financial savings yet their tendency to order takeaway food shows the need for multiple solutions to solve this issue. The universities need to improve their dining facilities by providing affordable and healthy cafeteria selections while they should also establish programs that teach students how to cook. The combination of health education programs and peer-led activities and institutional support for physical activities will help combat both sedentary lifestyles and unhealthy eating patterns. The practice of incorporating financial aspects and cultural factors and social elements into nutrition programs will help college students maintain healthy eating habits for extended periods.

Conclusion

The study shows that the way college students eat is influenced by a variety of institutional, social, and individual factors. 42.5% of the population eats meals prepared at home, which enables them to maintain their health. While their friends make the same choices, many prefer takeout because they like the taste and find it more convenient. According to the study, men prefer takeaway more frequently than women, who also cook more and have a better understanding of health. According to the survey, 82% of participants made dietary decisions as a result of peer pressure and social cultural status. According to the research, people can achieve their goals with more than just knowing about good habits. A significant barrier is the fact that 48% of users who have access to cooking facilities choose to cook for themselves. The gender-based analysis showed that both males and females participated equally because their dietary behaviors could be compared through their 50 male and 50 female participants. Females showed higher representation in postgraduate programs and they verified that home-cooked meals contribute to health, while males spent more money on takeout dining, which showed the different ways that men and women chose their food and spent their money. The study shows that in order to achieve effective solutions, educational approaches must be combined with initiatives that focus on social interactions, taste preferences, institutional dining areas, and system elements.

Table 1: Distribution of Living Arrangements among College Students

Living Arrangement	Number	Percentage
Rented apartments/shared accommodation	35	34.9%
Home with family	33	33.0%
College hostel	32	32.1%

Table 2: Cooking Frequency among College Students

Cooking Frequency	Number	Percentage
Cook daily	31	31.0%
Cook several times weekly	24	24.0%
Rarely cook	36	36.0%
Never prepare meals	9	9.0%

Table 3: Home-Cooked Meal Consumption Frequency

Consumption Frequency	Number	Percentage
Daily	42.5	42.5%
Most days (>5 times/week)	23	23.0%
Occasionally (2-4 times/week)	20.8	20.8%
Rarely	6.6	6.6%
Never	7.5	7.5%

Table 4: Takeaway Meal Consumption Frequency

Takeaway Frequency	Number	Percentage
Daily	3.8	3.8%
4-6 times weekly	5.7	5.7%
2-3 times weekly	15.1	15.1%
Once weekly	33	33.0%
Rarely	34.9	34.9%
Never	7.5	7.5%

Table 5: Primary Reasons for Takeaway Consumption

Primary Reason	Number	Percentage
Taste preference	42.5	42.5%
Socializing with friends	35.8	35.8%
Unavailability of home-cooked food	32.1	32.1%
Convenience/lack of time	30.2	30.2%
Lack of cooking skills	8.5	8.5%

Table 6: Post-Meal Physical Sensations after Takeaway Consumption

Physical Sensation	Number	Percentage
Feel heavy and sluggish	40	40.0%
Feel energetic and satisfied	21.9	21.9%
No noticeable difference	25.7	25.7%
Experience bloating/discomfort	12.4	12.4%

Table 7: Health Issues Attributed to Takeaway Food Consumption

Health Issue	Number	Percentage
No noticeable effects	41	41.0%
Digestive problems	31.4	31.4%
Weight gain	28.6	28.6%
Skin issues (acne/breakouts)	25.7	25.7%

Table 8: Gender Differences in Eating Behaviors and Food Preferences

Behavior	Male (%)	Female (%)
High takeaway consumption (2+ times/week)	34	12
High health consciousness regarding diet	22	58
Personal meal preparation	8	36
Daily home-cooked consumption	38	47
Negative post-takeaway sensations	30	50
Prefer traditional Indian meals	28	45

References

1. Yuan, X., Fujiwara, A., Matsumoto, M., Tajima, R., Shinsugi, C., Koshida, E., & Takimoto, H. (2022). Definitions and Assessment Methods of 'Home Cooking' in Studies with Dietary Variables: A Scoping Review. *Nutrients*, 14(16), 3344.
2. Wen, T., Tchong, W., & Ching, G. S. (2014). A Study on the Relationship between College Students' Personality and Their Eating Habits. *International Journal of Information and Education Technology*, 5(2), 146–149.
3. Grzymisławska, M., Puch, E. A., Zawada, A., & Grzymisławski, M. (2020). Do nutritional behaviors depend on biological sex and cultural gender? *Advances in Clinical and Experimental Medicine*, 29(1), 165–172.
4. Abraham, S., Noriega, B. R., & Shin, J. Y. (2018). College students eating habits and knowledge of nutritional requirements. *Journal of Nutrition and Human Health*, 2(1), 13-17.

5. Alakaam, A., & Willyard, A. (2020). Eating habits and dietary acculturation effects among international college students in the United States. *AIMS Public Health*, 7(2), 228. Alakaam, A., & Willyard, A. (2020). Eating habits and dietary acculturation effects among international college students in the United States. *AIMS Public Health*, 7(2), 228.
6. Amore, L., Buchthal, O. V., & Banna, J. C. (2019). Identifying perceived barriers and enablers of healthy eating in college students in Hawai'i: a qualitative study using focus groups. *BMC nutrition*, 5(1), 16.
7. El Ansari, W., Suominen, S., & Samara, A. (2015). Eating habits and dietary intake: is adherence to dietary guidelines associated with importance of healthy eating among undergraduate university students in Finland?. *Central European journal of public health*, 23(4), 306-313.
8. Badger, T. A., Segrin, C., Sikorskii, A., Pasvogel, A., Weihs, K., Lopez, A. M., & Chalasani, P. (2020). Randomized controlled trial of supportive care interventions to manage psychological distress and symptoms in Latinas with breast cancer and their informal caregivers. *Psychology & health*, 35(1), 87-106.
9. Choi, J. (2020). Impact of stress levels on eating behaviors among college students. *Nutrients*, 12(5), 1241.
10. Vieira, F. D. S. T., Muraro, A. P., Rodrigues, P. R. M., Sichieri, R., Pereira, R. A., & Ferreira, M. G. (2021). Lifestyle-related behaviors and depressive symptoms in college students. *Cadernos de Saúde Pública*, 37, e00202920.
11. Enriquez, J. P., & Archila-Godinez, J. C. (2022). Social and cultural influences on food choices: A review. *Critical Reviews in Food Science and Nutrition*, 62(13), 3698-3704.
12. Gallego-Schmid, A., Mendoza, J. M. F., & Azapagic, A. (2019). Environmental impacts of takeaway food containers. *Journal of Cleaner Production*, 211, 417-427.
13. Gonçalves, S., Félix, S., Martins, F., Lapenta, O., Machado, B. C., & Conceição, E. M. (2022). Food addiction problems in college students: The relationship between weight-related variables, eating habits, and food choices. *International Journal of Environmental Research and Public Health*, 19(21), 14588.
14. Hebbani, S., Ruben, J. P., Selvam, S. S., & Srinivasan, K. (2018). Influence of socio-cultural factors on the emotional problems among college going young-adult children of parents with alcoholism: A study from South India. *Asian Journal of Psychiatry*, 37, 26-31.
15. Higgs, S., & Ruddock, H. (2024). Social influences on eating. In *Handbook of eating and drinking* (pp. 1-16). Springer, Cham.
16. Janssen, H. G., Davies, I. G., Richardson, L. D., & Stevenson, L. (2018). Determinants of takeaway and fast food consumption: a narrative review. *Nutrition research reviews*, 31(1), 16-34.
17. Javeed, Q., Tabassum, Y., Burki, M. H. K., Butt, Z. I., Ahmed, A., & Muntha, S. T. (2021). Eating habits among university students. *Turk Online J Qual Inq*, 12, 9192-7.
18. Kos, M., Parfin, A., Drop, B., Herda, J., Wdowiak, K., Witas, A., ... & Kuszneruk, M. (2020). Lifestyle and eating habits of the high school students. *Polish Journal of Public Health*, 130, 30-38.
19. Lim, H. S., Ji, S. I., Hwang, H., Kang, J., Park, Y. H., Lee, H. H., & Kim, T. H. (2018). Relationship between bone density, eating habit, and nutritional intake in college students. *Journal of bone metabolism*, 25(3), 181.
20. Llanaj, E., Ádány, R., Lachat, C., & D'Haese, M. (2018). Examining food intake and eating out of home patterns among university students. *PLoS One*, 13(10), e0197874.
21. Lolokote, S., Hidru, T. H., & Li, X. (2017). Do socio-cultural factors influence college students' self-rated health status and health-promoting lifestyles? A cross-sectional multicenter study in Dalian, China. *BMC public health*, 17(1), 478.
22. Martins, B. G., Marôco, J., Barros, M. V., & Campos, J. A. (2020). Lifestyle choices of Brazilian college students. *PeerJ*, 8, e9830.

23. Miura, K., & Turrell, G. (2014). Reported consumption of takeaway food and its contribution to socioeconomic inequalities in body mass index. *Appetite*, 74, 116-124.
24. Moscatelli, F., De Maria, A., Marinaccio, L. A., Monda, V., Messina, A., Monacis, D., ... & Polito, R. (2023). Assessment of lifestyle, eating habits and the effect of nutritional education among undergraduate students in southern Italy. *Nutrients*, 15(13), 2894.
25. Qi, Q., Sun, Q., Yang, L., Cui, Y., Du, J., & Liu, H. (2023). High nutrition literacy linked with low frequency of take-out food consumption in chinese college students. *BMC Public Health*, 23(1), 1132.
26. Sotaquirá, L., Backhaus, I., Sotaquirá, P., Pinilla-Roncancio, M., González-Urbe, C., Bernal, R., ... & Ramirez Varela, A. (2022). Social capital and lifestyle impacts on mental health in university students in Colombia: an observational study. *Frontiers in public health*, 10, 840292.
27. Watanabe-Ito, M., Kishi, E., & Shimizu, Y. (2020). Promoting healthy eating habits for college students through creating dietary diaries via a smartphone app and social media interaction: online survey study. *JMIR mHealth and uHealth*, 8(3), e17613.

